

COUNTY BOROUGH OF ST. HELENS



Annual Report

of the

Medical Officer of Health

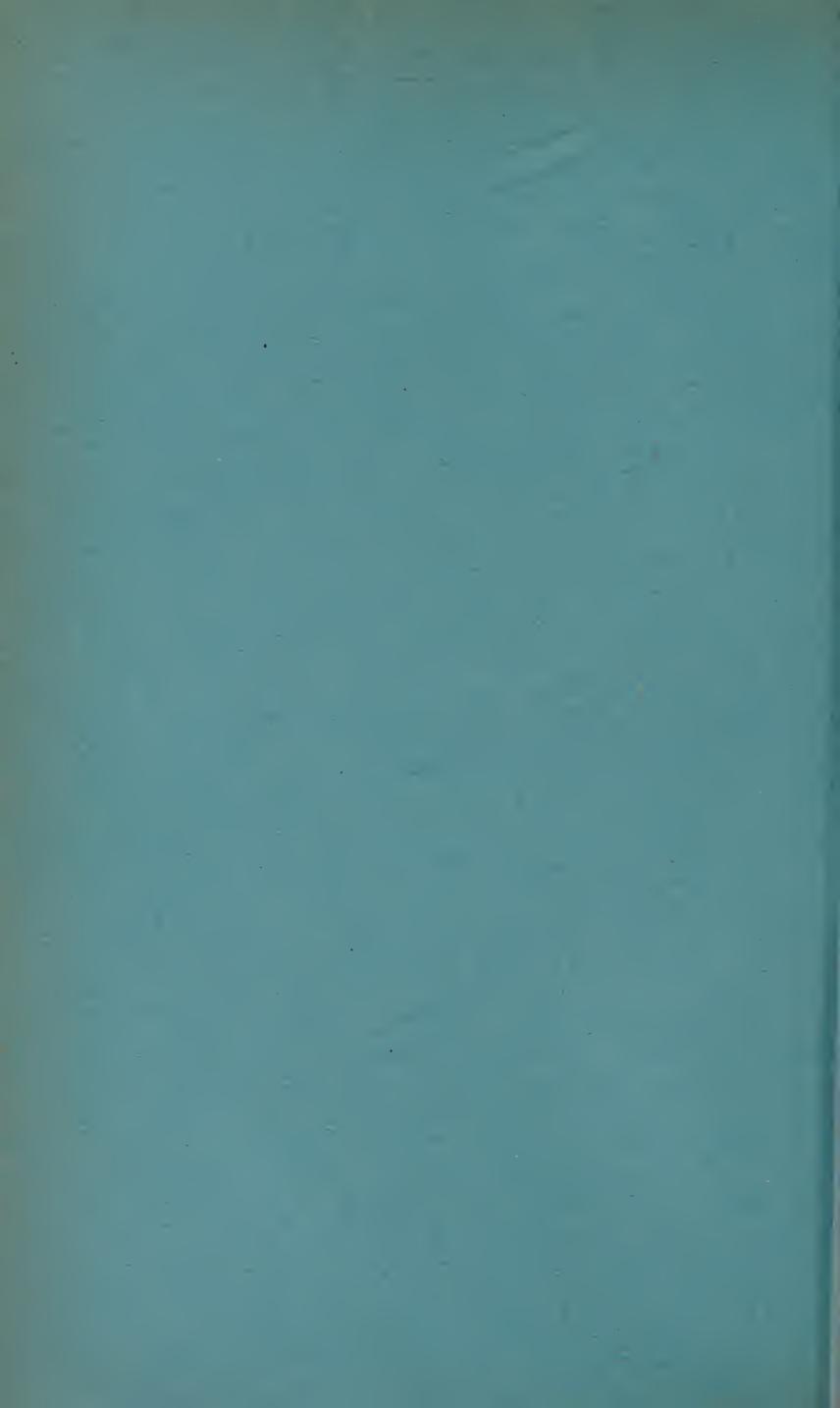
for the Year 1957

G. O'BRIEN, M.B., Ch.B., D.P.H.,

Medical Officer of Health and Principal School Medical Officer

St. Helens:

WOOD WESTWORTH AND CO. LTD., PRINTERS AND STATIONERS
HARDSHAW STREET



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TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE COUNTY BOROUGH OF ST. HELENS

Mr. Mayor, Ladies and Gentlemen,

I beg to submit the Report on the health of St. Helens for the year 1957.

The following statement shows some of the principal statistical rates during the past five years.

	1953	1954	1955	1956	1957
Birth rate per 1,000 of population	17.5	17.0	16.0	16.8	17.2
Death rate per 1,000 of population	10.6	10.9	11.0	10.7	10.7
Infant Mortality per 1,000 live births	43.8	41.0	32.9	27.4	31.0
Maternal Mortality per 1,000 total births	0.51	1.55	3.79	1.04	0.51
Tuberculosis death rate per 1,000 of population	0.29	0.26	0.25	0.14	0.16

The birth rate of 17.2 per thousand estimated population was a slight increase over previous years and, in fact, the highest since 1953. The infantile mortality rate at 31.0 was slightly higher than the lowest recorded rate of 27.4 in 1956, but was still the second lowest recorded rate for the Borough up to the present. This is a matter for satisfaction, but continued watch is kept on the factors involving ante-natal care in the mother and care of the child.

A marked feature during the year was the widespread epidemic of socalled Asian influenza, a full report on which is given in the section on infectious diseases. Although it was mild in type, as generally experienced throughout the rest of the country, six deaths were directly attributed to it. Interference with school attendance and industry throughout the town was marked.

No case of diphtheria was recorded during the year, but continued uneasiness is felt at the trend towards parental omission to have their children immunised as early as possible against diphtheria. The only guarantee of protection against the disease still remains in a high immunity level of the child population.

The scheme for vaccination against poliomyelitis was greatly extended during the year, and much of the work of the Department had to be diverted temporarily to cope with the desire of the Ministry for mass vaccination of the age-groups concerned. Consideration had to be given to increasing the clerical establishment to cope with the extra work, and future consideration will definitely have to be given to the question of extra medical and nursing assistance. Without such a review of establishment it would be impossible to contemplate a scheme of mass vaccination for adolescent and adult age groups which will assuredly come. It is also essential that the work of B.C.G. vaccination must proceed. The time devoted to this unfortunately was limited during the year owing to the great demands made on the staff by poliomyelitis vaccination work.

The maternal mortality rate during the year was extremely low at 0.51 and a special report on the single case occurring is given in the section dealing with Maternity and Child Welfare.

Progress in Slum Clearance during the year showed an advance over 1956 but was still rather slow because of shortage of staff. Details of the work accomplished are given in the Chief Public Health Inspector's Section of the Report.

There was little improvement in the staff situation regarding Public Health Inspectors during the year, and this had its inevitable effect on the urgent and pressing problems of the work of Slum Clearance, investigation of Atmospheric Pollution and field work in the realm of Food Hygiene. A review of the staffing position was taken by the Department during the year and the establishment was increased by two Specialist Inspectors to assist in the special work of housing inspection and food inspection. As regards Health Visitors, the position was a little easier at the end of the year owing to the fact that four students were trained and taken on the staff, but at the end of the year there was still a deficiency of approximately one-third of the staff.

Mention must be made of the sad death during the year of Alderman N. Birch, J.P., who had for many years been Chairman of the Public Health and Health Committees. His keen interest during many years was a constant encouragement to the Department, and the successful accomplishment of many departmental projects was due to his wise guidance. He was succeeded in the Chairmanship by Alderman M. A. Shard, J.P. Mention should also be made of the retirement of Mr. E. G. Patterson, Chief Clerk, during the year. Mr. Patterson had given many years of valuable work in the administration and guidance of the clerical sections. During the time of re-organisation following the National Health Service Acts and the establishment of new sections with their consequent development in the following years, he undertook with great success a very responsible task.

For the successful carrying on of the work of the Department and for advances made in the various Services during the year, I am indebted to the ever willing and able assistance of every member of the staff. I would also take this opportunity of thanking the members of the Council for their help, advice and kindly consideration.

I have the honour to be,

Your obedient Servant,

G. O'BRIEN.

PUBLIC HEALTH COMMITTEE, 1957/8

Chairman:

ALDERMAN M. A. SHARD, J.P.

Deputy-Chairman:
COUNCILLOR J. F. McDONNELL

The Right Worshipful the Mayor COUNCILLOR J. J. HENEBERY, J.P.

Alderman W. Burrows, J.P.

- " J. E. Hughes, J.P.
- " W. Marshall
- " J. O'Brien
- ,, R. Rennie
- " J. Thackray, J.P.
- " J. A. Waring

Councillor R. S. Ellison, J.P.

- ,, P. Heneghan
- ,, P. M. Lowe
- ,, A. E. Williams, J.P.

HEALTH COMMITTEE

The Public Health Committee and the following:

Mrs. H. B. Bates (co-opted)

Mrs. B. McGhie (co-opted)

Dr. D. R. Holden (nominated by the Local Medical Committee)

Mr. W. Davies (nominated by the St. Helens Executive Council)

Mrs. E. M. L. Else, J.P. (nominated by St. Helens and District Hospital Management Committee).

STAFF

Medical Officer of Health and Principal School Medical Officer: GERALD O'BRIEN, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health: JAMES HUTCHINSON WALSH, L.R.C.S.I., L.R.C.P.I., L.M., D.P.H.

Assistant Medical Officers of Health:

Enid M. Hughes, M.B., Ch.B.

Mary Pilling, M.R.C.S., L.R.C.P., C.P.H.

John E. O'Malley, M.R.C.S., L.R.C.P., D.P.H.

(Granted leave to 1/7/57 to attend D.P.H. course).

Sheila C. Blackburn, M.B., B.Ch., B.A.O., D.P.H.

Phyllis Jean Disley, M.B., Ch.B., D.P.H. (ceased 30/6/57).

Dental Officers:

Vincent Higham, L.D.S., Senior Dental Officer.

Public Health Inspectors:

Chief Public Health Inspector: Nathaniel Birch

Stephen D. Burge, Deputy Chief Public Health Inspector (ceased 31.1.57)

James R. R. Norris, Deputy Chief Public Health Inspector (from 8.4.57)

Griffith R. Hull, Smoke Abatement Inspector

James R. R. Norris, Factories and Shops Inspector (to 7.4.57)

James R. O'Neill, Factories and Shops Inspector (from 22.6.57)

Henry T. Rothwell, Sampling Officer

Fred Platt, Housing Inspector

Thomas Dean, Food Inspector

Neil Galbraith Weir, District Public Health Inspector (ceased 11.5.57)

James Arthur O'Neill, District Public Health Inspector (to 21.6.57)

John B. Douglas, District Public Health Inspector

Kenneth Simm, District Public Health Inspector (from 29.7.57)

Brian A. Taylor, District Public Health Inspector (from 29.7.57)

Health Visitors and School Health Visitors: Superintendent: Rita Lamb

Edith F. Barrett

Lilian S. Boardman

Emily E. Cameron

Margaret Gandy

Teresa J. Howard

Irene L'Amie

Edna Manns (ceased 26/5/57)

Catherine McCormack (from 1/7/57)

Constance M. Pennington

Jean Pennington (from 1/7/57)

Annie Pimblett

Leah Fazackerly (Part-time)

May Fairclough (Part-time)

Muriel H. Pearcey (Part-time)

Margaret P. Heffernan (School Nurse)

from 1/7/57

Kathleen Wright (School Nurse)

from 1/9/57, ceased 15/12/57

STAFF—continued

Midwives:

Non-Medical Supervisor of Midwives: Audrey I. Robinson

Ellen Cunliffe (ceased 31/10/57) Caroline Leonard

Edna Davies (from 6/6/57) Mary McCormack

Edith Dingsdale Hannah S. Myerscough

Ellen Dooley (ceased 10/9/57) Elsie A. Parr

Eileen Evans Mary A. Pye (ceased 31/10/57)

Rosanna J. Farrington (ceased 12/2/57) Amy Simm

Sarah J. Gilroy Florence Stanier (from 11/11/57)

Kathleen Somers

Chief Clerk: Edward G. Patterson (ceased 8/4/57)

J. J. Spencer (from 1/5/57)

Welfare Officer (Prevention of Illness, Care and After-Care):
Miss M. Miller

Tuberculosis Health Visitor (Part-time): Mrs. Bridget Jackman

Physiotherapist: Miss Norah Large, M.C.S.P.

Home Help Organiser: Mrs. E. G. Oldridge

Duly Authorised Officers:

Eric Causey (Mental Health Worker)
Miss Mary McKenna (Mental Health Worker)
Norma M. Rickarby (Mental Health Worker) (from 16/12/57)
James C. Ratcliffe (Mental Health Clerk)

Occupation Centre Supervisor: Miss I. W. Marsh

STAFF—continued

Clerk | Dispenser:

Albert Spencer (also part-time Welfare Officer, Special Treatment Centre)

Ambulance Service:

G. M. Norman (Ambulance Superintendent)

Day Nursery: A. E. Brown (Matron)

The following are Part-time Officers:

Consultant Obstetricians:

Percy Malpas, M.B., Ch.B., L.R.C.P., F.R.C.S., F.R.C.O.G.

Henry V. Corbett, M.Sc., M.D., Ch.B., F.R.C.S., L.R.C.P., M.M.S.A., M.R.C.O.G.

Area Chest Physician:

J. B. H. MacArthur, M.B., B.S., M.R.C.P.E.

Public Analyst and Agricultural Analyst:

J. G. Sherratt, B.Sc., F.R.I.C.

Dental Officer: Margaret Malcolm, L.D.S.

I.—GENERAL AND VITAL STATISTICS—1957

Area (acres) Population (estimated, mid-year Rateable Value Product of a penny rate	r 1957)		••••		•••••	11 £86	8,887 0,900 8,395 3,410
STATISTIC	AL SUM	MAR	YF	OR 195	57		
Live Births:— Legitimate Illegitimate				M. 965 32	F. 882 24	2 1,84	7
	Totals	•••••		997	906	1,90	3
Birth Rate per 1,000 of the esting	mated pop	oulati	on	•••••		•••••	17.2
Still-Births:—M. 38, F. 30; Tot Rate per 1,000 total (live		birth	ıs				34.5
Deaths:—M. 662, F. 522; Total Crude Death Rate per 1,		estir	nate	d popul	ation		10.7
Number of women dying from birth:	diseases a	and a	ccide	ents of p	oregna	ncy and o	child-
					_	er 1,000 t	
			Dea		(live	er 1,000 t and still births	
From sepsis			Dea		(live	and still	
	 ar of age:-		Dea		(live	and still births	
Deaths of infants under one year			Dea	ths l M.	(live	and still births 0.51 Total	
Deaths of infants under one year Legitimate			Dea	ths l	(live	and still births 0.51	
Deaths of infants under one year				M. 38 3	(live	and still births 0.51 Total 56	
Deaths of infants under one year Legitimate				M. 38 3	F. 18	and still births 0.51 Total 56 3	
Deaths of infants under one year Legitimate Illegitimate Death Rate of infants under on All infants per 1,000 live Legitimate infants per 1,000 live and the second seco	Totals e year of births 000 legiting	age:-	live	M. 38 3 41 births	F. 18 -	and still births 0.51 Total 56 3	31.0 30.3
Deaths of infants under one year Legitimate Illegitimate Death Rate of infants under on All infants per 1,000 live	Totals e year of births 000 legiting	age:-	live	M. 38 3 41 births	F. 18 -	and still births 0.51 Total 56 3	31.0
Deaths of infants under one year Legitimate Illegitimate Death Rate of infants under on All infants per 1,000 live Legitimate infants per 1, Illegitimate infants per 1	Totals e year of births 000 legitin,000 illegi	age:- age:- mate l	live live	M. 38 3 41 births	F. 18 -	and still births 0.51 Total 56 3	31.0 30.3
Deaths of infants under one year Legitimate	Totals e year of births 000 legitin,000 illegi	age:- nate l timat	live live	M. 38 3 41 births	F. 18 -	and still births 0.51 Total 56 3	31.0 30.3 53.6
Deaths of infants under one year Legitimate Illegitimate Death Rate of infants under on All infants per 1,000 live Legitimate infants per 1, Illegitimate infants per 1. Deaths from Measles	Totals e year of births 000 legitin,000 illegi	age:- mate l	live live	M. 38 3 41 births	F. 18 -	and still births 0.51 Total 56 3	31.0 30.3

Table V.S.1. Statistics for St. Helens

				ė			DE	ATH	S FRO	M		
YEAR	Population	Birth Rate	Crude Death Rate	Infant Mortality Rate	Smallpox	Measles	Scarlet Fever	Typhoid Fever	Typhus Fever	‡ Diarrhoea	Whooping	Diphtheria
1908 1909 1910 1911 1912 1913 1914 1915† 1916† 1917† 1918† 1919† 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937 1938 1939 1940† 1941† 1942† 1943† 1948† 1948† 1948† 1948† 1948† 1950 1951 1952 1953 1954 1955 1956 1957	90,000 90,600 90,600	35.2 32.0 32.7 33.5 32.0 32.2 33.3 32.1 26.5 22.0 24.1 25.5 31.8 29.1 26.4 24.4 24.1 23.9 23.2 20.8 21.8 20.1 18.0 19.1 18.7 18.3 18.6 17.7 19.8 20.5 20.3 22.2 21.3 17.9 17.9 17.9 17.9 17.9 17.9 17.9 17.9	16.0 18.5 14.5 18.3 15.5 18.9 17.1 19.3 16.8 16.5 21.2 15.0 13.4 11.9 12.0 12.0 12.0 11.4 12.5 11.4 12.5 11.4 11.6 13.4 11.6 13.4 11.6 13.7 10.6 13.7 10.7 10.7 10.7	122 149 121 158 124 155 138 129 108 123 126 117 113 103 100 102 88 98 114 80 88 89 116 65 94 56 88 70 79 78 71 65 72 57 60 60 70 61 41 33 33 44 41 33 33 33 44 41 33 33 34 41 35 36 36 37 37 37 37 37 37 37 37 37 37 37 37 37	001000000000000000000000000000000000000	0 188 15 69 189 62 189 126 26 56 7 60 0 29 17 27 60 15 49 7 30 1 12 10 2 6 0 4 0 2 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	29 33 22 13 19 26 5 12 30 24 9 7 5 4 4 1 7 1 2 5 6 2 0 1 2 2 2 4 2 3 3 0 1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0	12 13 10 22 8 4 4 6 2 2 0 2 0 0 2 1 2 3 0 0 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	000000000000000000000000000000000000000	59 27 51 143 49 120 98 78 64 35 44 62 28 24 36 35 43 26 29 21 12 16 18 18 18 18 19 11 11 11 11 11 11 11 11 11 11 11 11	7 62 16 39 46 18 24 40 34 19 24 7 7 24 3 10 11 33 4 5 21 13 8 0 4 5 2 1 15 3 7 6 4 5 15 1 4 2 0 3 1 1 2 2 0 0 1 0 0 0 0	17 12 7 8 19 15 8 32 85 79 100 25 13 5 5 8 4 6 6 7 10 11 4 7 0 8 18 17 26 15 14 23 19 13 11 6 1 0 2 0 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0

[†] Estimated civil population. * Borough extended. ‡ Gastritis, Enteritis and Diarrhoea from 1950 inclusive.

POPULATION.—The Registrar General's estimate of population for mid-year 1957 was 110,900 compared with 110,900 for mid-year 1956. During the year the natural increase in population (i.e. excess of births over deaths) was 719.

BIRTHS.—The number of live births registered during 1957 as belonging to St. Helens was 1,903, giving a birth rate of 17.2 per 1,000 of the estimated population. This rate is slightly higher than that for 1956 when 16.8 was recorded. The birth rate when adjusted by the area comparability factor of 0.94 gives a rate of 16.2 per 1,000 of the population. The birth rate for England and Wales during 1957 was 16.1

Of the 1,903 births, 997 were males and 906 females, giving a sex ratio of 1099 males to every 1,000 females.

DEATHS.—During 1957 there were 1,184 deaths from all causes (662 males and 522 females) giving a crude death rate of 10.7 per 1,000 of the population, which is the same rate as recorded in 1956. The adjusted death rate for the year (for national comparison) after applying the area comparability factor of 1.32 was 14.1 per 1,000 of the population. The death rate for England and Wales as a whole for 1957 was 11.5 per 1,000 of the population.

Table V.S.4 shows that of these deaths, 184 were due to cancer and 506 to diseases of the heart and circulatory system. These two causes, therefore, accounted for 690 out of a total of 1,184 deaths, i.e. approximately 58% There were 18 deaths from tuberculosis (all forms) during the year compared with 15 in the previous year.

The infantile mortality rate was 31.0 per 1,000 live births, compared with 27.4 in the previous year. The rate for England and Wales was 23.1 per 1,000 live births.

The maternal mortality rate for the year 1957 was 0.51 per 1,000 live and still births.

Further reference to the infantile and maternal mortality death rates is made in the appropriate sections of this Report.

Causes of Death.—Figures relating to the causes of, and ages at, death are given in Table V.S.4.

Deaths from Tuberculosis.—Tuberculosis was the cause of 1.5% of all deaths that occurred during 1957. The corresponding percentage in 1956 was 1.3.% The ages at which these deaths occurred are shown in Table V.S. 4. Further reference is made in the special section (VII) on Tuberculosis.

Malignant Diseases.—The deaths from these diseases during the past five years were as follows:—

Table V.S.2.

AGE GROUPS	1953	1954	1955	1956	1957
Under I year				1	_
1	1				1
5		1	-	_	1
15—	1	1		2	
25—	16	8	17	9	10
45	87	83	88	99	7 5
65—	58	67	61	61	64
75 and over	33	32	47	40	33
Total	196	192	213	212	184
Percentage of the total deaths Death rate per 1,000 of population	17.1 1.8	15.9 1.7	17.2 1.9	17.9 1.9	15.6 1.7

The following table V.S.3, gives particulars of deaths due to malignant causes during the last five years:

Table V.S.3.

Conso	19	53	19	954	19	55	19	56	1957	
Cause	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Cancer— Stomach Lung Other	 29 34 51	14 3 65	23 42 56	13 7 51	34 31 55	16 8 69	26 53 52	11 5 65	24 34 50	13 5 58
Totals	 114	82	121	71	120	93	131	81	108	76
	1	96		192	2	213	21	2	1	84

INFANTILE MORTALITY.—During 1957 there were 59 deaths off infants under one year of age (41 males and 18 females), corresponding to an infantile mortality rate of 31.0 per 1,000 live births. This compares with 511 deaths and a rate of 27.4 in 1956.

Careful supervision continued to be exercised during the year and investigations have been carried out in every instance where death has occurred in a child under one year of age. A summary of the findings following these investigations is given in the section of this Report dealing with Maternity and Child Welfare.

Table V.S.4.

Causes of, and ages at, death during 1957

		All			At	Ages				
Causes of Death	Sex	Ages	0—1	1-	5—	15—	25—	45—	65—	75— ———
Tuberculosis Resp	F F	11 5					2 1	6 2	3 1	1
Tuberculosis Other	M F	2			1				1	
Syphilitic Disease	M F	2	_	=	_	_	_		=.	1
Diphtheria	M F								_	Q
Whooping Cough	M F						_		_ '	
Meningococcal Infections	M F	1	1							
Acute Poliomyelitis	M F									
Measles	M F	_	=	=	=	=	_			
Other Infective and Parasitic Diseases	M	3	1		t	1		1	_	
Malignant Neoplasm, Stomach	MF	24 13	_	_	=	=	_	8 3	10 7	6 3
Malignant Neoplasm, Lung, Bronchus	MF	34 5	_		_		2	17	13 2	2
Malignant Neoplasm, Breast	M F	1 13	_		_	_		6	5	1 2
Malignant Neoplasm, Uterus	MF	6	_	_	_	=	1	5	_	_
Other Malignant and Lymphatic Neoplasms	MF	49 39	demonstration of the second	1	1		1 6	18 15	19 8	10 9
Leukaemia, Aleukaemia	MF	1		=	1	_		-		
Diabetes	M F	13			_		1	5	1 2	2 5
Vascular Lesions of Nervous System	M F	55 76		_		1	2	14 16	22 29	18 28
Coronary Disease, Angina	M F	118					6	42 12	41 25	29 18
Hypertension with Heart Disease	MF	11 8	_	=	=	=	=	3 2	4 4	4 2
Other Heart Disease	M	64 76	_		1		1 4	15 17	18 19	29 36
Other Circulatory Disease	MF	23 30	=		=	=	_	5 3	6 7	12 10
Influenza	M	14 11	1	1		4	2	6 2	4 2	3
Pneumonia	M F	32 41	4 2	1 1	1	1	2	4 4	8 13	12 18
Bronchitis	M F	65 25	1	_	=	_	1	22 8	25 10	16 . 6
Other Diseases of Respiratory System	M	7 4	-	=	_	1	1 2	2	2	1 1
Ulcer of Stomach and Duodenum	M	12					2	2	7	1
Gastritis, Enteritis and Diarrhoea	M F	4 4	2	_			\$1000 CHINE		1 1	1 —
Nephritis and Nephrosis	M F	9		_		1 1	3	3 1	5	2 4

Table V.S.4.—continued.

Causes of Death	Sex	All Ages	0—1	1—	At 2	Ages 15—	25—	45—	65—	75—
Hyperplasia of Prostate	M F	7	_			=		_	2	5
Pregnancy, Childbirth, Abortion	M F	1	_	_	_	_	<u> </u>			_
Congenital Malformations	M F	9 5	6 4	_	_	2	1	1	_	_
Other Defined and Ill-defined Diseases	M F	70 65	23 10		2	2	3 4	6 5	7 10	27 35
Motor Vehicle Accidents	M F	6	_	_	1	1	2 2	3	1	1
All Other Accidents	M F	18 12	1	3 1			4 2	5	1	2 8
Suicide	M F	5 5		_	_	1		2 4	1	1
Homicide and Operations of War	M F	2	1	_		_	_	1		_
All Causes	M F	662 522	41 18	5 3	10	9 8	34 29	184 119	197 152	182 192
TOTALS		1184	59	8	11	17	6 3	3 03	3 49	374

II.—METEOROLOGY

Rainfall.—The total rainfall for 1957 as measured at the Victoria Park Observatory was 31.32 inches compared with 34.29 inches in 1956. At the Eccleston Hill Waterworks 34.27 inches were recorded compared with 36.20 inches in the previous year.

The highest daily rainfall of the year—1.25 inch—occurred during the 24-hour period ending at 9 a.m. on September 17th. Nearly half the year's rainfall (14.1 inches) occurred in July, August and September, the wettest month being September with 5.47 inches. April was the driest month with .52 inch.

Sunshine.—1132 $\frac{3}{4}$ hours of sunshine were recorded during the year, one half of it during April, May and June. The sunniest month was June with $259\frac{1}{2}$ hours. $13\frac{3}{4}$ hours of sunshine were recorded on both June 17th and 18th and during June more than 10 hours were recorded on no less than 15 separate days.

Temperature.—The highest recorded temperature of the year was 85°F on June 29th; the lowest 21.5°F on February 20th.

Wind Pressure.—Strong winds of over 30 m.p.h. were recorded on July 27th and November 1st.

The following Table M.1., shows the maximum and minimum temperatures recorded in each month and the distribution of sunshine and rainfall throughout the year.

Table M.1.

Month	Maximum temperature recorded in shade	Minimum temperature recorded in shade	Sunshine	No. of sunless days	Rainfall	No. of days on which rain fell
January February March April May June July August September October November December	67.2 65.8 66.0 85.0	°F 28.2 21.5 33.1 28.0 30.5 39.2 46.8 43.6 34.2 34.3 26.5 22.0	Hours 20¾ 66½ 74¼ 126¼ 167 259½ 102 103¾ 86½ 64¼ 39 23	17 5 8 4 1 6 3 4 11 17 19	Inches 1.87 1.63 2.64 0.52 1.62 1.42 3.82 4.81 5.47 3.59 1.17 2.76	14 19 17 6 12 10 23 20 22 15 8 17
			11323	99	31.32	183

III.—INFECTIOUS DISEASES

General Observations.—An outstanding feature from the epidemiological point of view during 1957, was the occurrence of the epidemic of "Virus A" influenza (Asian Influenza). The first cases reported in St. Helens were amongst a group of people recently returned from Rome, where they had been in contact with known infection. These cases occurred in the first week in September and by the following week infection was spreading rapidly, particularly in the child population. By the week ending 28th September, over 7,000 children were absent from school due to the epidemic, but after this date, infection began to die out rapidly in the child population but rather more gradually amongst adults. Sporadic cases, however, were still occurring in the adult population up to the beginning of November. In the majority of cases, the symptoms were mild and quickly responded to treatment, but a number of people developed influenzal pneumonia and 6 deaths occurred due to this condition. Four of these deaths were in previously healthy young adults in the age group 15 to 25 years. It is impossible to state accurately the number of cases occurring in the County Borough during the epidemic as the condition is not notifiable, but it is interesting to record that at the peak of infection during the last week of September, some 10.3% of the staff of one of the largest industries in the town were absent due to illness. Blood specimens taken from individual cases confirmed the fact that infection was due to the Type A Influenza Virus.

One other disease reached epidemic proportions in the spring of the year. This was measles, and the majority of the cases occurred in pre-school children and children attending infant or junior schools. A total of 2,331 cases was notified during the year, but despite this high incidence, complications were rare and only one death was attributed to the complication of bronchopneumonia in a child aged 14 months.

There were 284 cases of whooping cough as compared to 145 in the previous year. The incidence of scarlet fever was low and this condition continued to be remarkably mild.

It is satisfactory to note that for the sixth successive year there was no case of diphtheria in St. Helens.

In the period from June to November, 1957, 17 cases of anterior poliomyelitis were notified. Of these, 12 were of the paralytic type and 5 of the less serious non-paralytic type of the disease. Sixteen of the cases were in children aged between 1 and 9 years of age and one rather severe case occurred in an adult. The sex distribution was 11 female and 6 male. No case of poliomyelitis occurred in a person vaccinated against the condition and there was no fatal case of this disease during the year.

There were 35 cases of dysentery notified during the year which was a decrease compared to 1956. Shigella Sonnei was the causative organism in all cases.

There was one major outbreak of food poisoning during 1957. This occurred in a school canteen. A total of 27 school children and 8 adults were involved in this outbreak and it was established that the causal organism was Clostridium Welchii. The symptons were for the most part mild and their duration in no case was longer than 48 hours. This type of food poisoning is frequently associated with food prepared in large quantities at communal kitchens and is difficult to deal with as the organism is heat resistant. Following

an investigation, renewed instructions were given to the School Meals Service on the cleansing and sterilization of containers used for the conveyance of food from the meals centre to dining centres. The 3 other cases of food poisoning that occurred during the year were sporadic cases of Salmonella, the types isolated being Stanley, Typhi-murium and Oranienburg.

An outbreak of Para-typhoid B, involving two families, occurred in February. The first case notified to the Health Department was of a tenmonths old baby who had been suffering from vomiting and diarrhoea and this child was found to have a faecal swab positive for Para-typhoid B. On investigation, it was found that the baby of another family living in the same house had been suffering from rather mild similar symptoms for some time. This child was also found to be positive for Para-typhoid B.

The remaining members of both families were then investigated and in all 5 people, including the initial case, were found to be positive. Four of these cases had definite symptoms and one was a symptomless excreter. The phage type of all the organisms isolated was "Dundee". The cases were treated at Peasley Cross Isolation Hospital and except in the case of the symptomless excreter, were discharged in two to three weeks. This case continued to give positive specimens for some time but eventually responded to treatment. Bacteriological checks carried out on this boy on his return home, proved negative.

The house in which these two families lived was found to be infested with mice. Steps were taken to remedy this and in the course of this work the bodies of two mice were sent for bacteriological examination. Salmonella Para-typhoid B, (phage type Dundee) was isolated from the intestinal tract of one of these mice. The question remains undecided as to whether the mice infected the humans, or the humans infected the mice!

Table I.D.1.

Notification of Infectious Diseases received during the undermentioned years.

	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957
Smallpox Scarlet Fever Diphtheria Measles Whooping Cough Enteric Fever Dysentery Erysipelas Pneumonia* Typhus Fever Puerperal Pyrexia Ophthalmia Neonatorum Acute Poliomyelitis Acute Encephalitis Meningococcal Infections Malaria		- 243 8 857 422 - 10 17 59 - 1 2 1 - 3	121 1300 407 58 18 25 — 1 8 —	- 130 1 2613 552 6 16 14 91 - 3 - 6 -		92 			286 	208 2331 284 5 35 8 42 - 3 1 17 - 11

^{*} Acute Primary and Influenzal

Table I.D.2.

Infectious Diseases.—Total number of cases notified, number of cases admitted to isolation hospital, and the total deaths from each disease as shown in Registrar General's classification of deaths.

Year 1957

	DISEA	SE				Notifications received	Cases admitted to hospital	Total Deaths
Smallpox	00++0MD W	***	*****	*****	*****			-
Scarlet Fever		+ + + 0 +	*****	0+ 1040	*****	208	124	
Diphtheria		++++	pe wa.		*****	-		
Measles			*****	****	*****	2331	20	1
Whooping Cou	i g h .		*****	*****	******	284	5	
	w0****P		*******	*****		5	5	-
	0 000 pm		*****	******	*****	35	4	
			*****	******		8		-
Pneumonia, Ad		nary ar	nd In	fluenza	1	42	24	6
Typhus Fever			*****	*****	0 × 0×10 ×		-	
Puerperal Pyre			*****	010110	man 00	3	1	
Ophthalmia N		m	*****	*****	*****	1		
Acute Poliomy			******	*****	*****	17	16	-
Acute Encepha			*****	***	900000			
Meningococca	Infection	ons	******	*****		11	11	
Malaria	BA 244B	nd + P459	(In a 440)	******	*****			
Food Poisonin	g			****	*****	38	1	

Table I.D.3.

Age distribution of cases of Infectious Diseases notified.

Year 1957

DISEASE	Notifications received	Under 1	1	2—	3—	4-	5—	10—	15—	20—	35—	45—	65—
Scarlet Fever Diphtheria Measles Whooping Cough Enteric Fever Dysentery Erysipelas Pneumonia* Typhus Fever Puerperal Pyrexia Ophthalmia Neonatorum Acute Poliomyelitis Acute Encephalitis Meningococcal Infections Malaria Food Poisoning	208 2331 284 5 35 8 42 - 3 17 - 11 - 38	1	5 257 34 1 - 3 - 1 - 1 -	281 40 1 2 - 1 - 3 - 4	24 	26 	111 986 96 8 -3 -7 -2 -9		- - - - - - - - - - - - - - - - - - -	- - 1 - 2 5 2 8	1 - 2 1 3 - -	- - - 3 4 9 - - - 8	7

*Acute Primary and Influenzal

Disinfection and Disinfestation.—By arrangement with the Liverpool Regional Hospital Board the use of facilities for disinfection of personal articles of patients is retained at the St. Helens Peasley Cross Isolation Hospital. Facilities are also retained at this Hospital in the Cleansing Block for the treatment of scabies and the cleansing of verminous persons. During 1957, 15 cases of scabies were treated, and 32 infested persons were cleansed under these arrangements. The corresponding figures for 1956 were 2 cases of scabies and 8 infested persons.

Laboratory Work.—The following Table, I.D.4., shows the number of specimens received by the Health Department for distribution to various laboratories during the year.

Table I.D.4.

Snacimans	Number	Results		
Specimens	Received	Positive	Negative	
Swabs for Diphtheria Blood for Rh Factor Gastro-Enteritis, Dysentery, and	11 496	363	11 133	
Food Poisoning Typhoid and Paratyphoid	574 14	106 2	468 12	
Other Specimens Total	1095	471	624	

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IV.—IMMUNISATION AND VACCINATION

Diphtheria Immunisation.—In 1957 the Local Authority's Scheme for Diphtheria Immunisation of the child population was continued as previously. Table I.V.1, below, indicates the number of children in different age groups who received primary immunisation and reinforcing injections in 1957.

Table I.V.1.

Number of children immunised against Diphtheria during 1957.

	Under 1 year	1-4 years	5-14 years	15 years or over	Total
Primary Immunisations Local Authority Medical Officers Private Practitioners	474 241	200 117	376 22	- 3	1050 383
Total	715	317	398	3	1433
Reinforcing Injections Local Authority Medical Officers Private Practitioners Total		151 11 162	791 12 803	6 1 7	948 24 972

The following shows the record of primary immunisations carried out since 1952.

1952	1953	1954	1955	1956	1957
1551	3071	1994	1476	1216	1433

The trend towards a gradual decrease in the number of children being immunised against diphtheria continued during 1957. This gives rise to considerable concern. The apathy towards diphtheria immunisation seems to be due to a number of factors, the major one being that no case of diphtheria has occurred in the County Borough for six years. This has given parents a sense of false security and they tend to be more interested in the new vaccination procedures that are continually in the public eye. The rapid development of the antipoliomyelitis vaccination campaign has swept like a wave over the pre-existing schemes, temporarily submerging them. The increase in the total number of "jabs" that any one child is now liable to have has made parents selective at the expense of diphtheria immunisation.

A purely local reason for the decline in the immunity index has been the shortage of health visiting staff, for despite the progress made in health education the personal contact between parent and health visitor still remains the most effective means of maintaining the level of diphtheria immunisation.

Whatever the reasons, it is to be hoped that it will not take an outbreak of diphtheria to bring home to parents their responsibilities in this matter and that the price of conferring immunity against poliomyelitis on the child population will not be the return of diphtheria.

Table I.V.2.

Diphtheria Immunisation in relation to child population.

Number of Children at 31st December, 1957, who had completed a course of Immunisation at any time before that date (i.e. at any time since 1st January, 1943).

Age at 31/12/57 i.e. Born in Year	Under 1 1957	1-4 1956-1953	5-9 1952-1948	10-14 1947-1943	Under 15 Total
Last complete course of injections (whether primary or booster) (A) 1953-1957	213	3,515	5,903	5,052	14,683
(B) 1943-1952			1,347	3,513	4,860
(C) Estimated mid-year child population	1,840	6,960	18,200		27,000
*Immunity Index	11.57%	50.5%	60.19%		54.38%

^{*}The Immunity index refers only to children who have had either a primary or re-inforcing injection during the last five years.

The following Table, I.V.3., shows the number of children immunised against Whooping Cough under this scheme during the year.

Table 1.V.3.

Number of children immunised against Whooping Cough during 1957.

	under 1 yr.	1 yr.	2 yrs.	3 yrs.	4 yrs.	5 yrs.	over 5 yrs	Total
(1) Primary Immunisation (a) Whooping Cough Antigen only Local Authority Medical Officers Private Practitioners	2		an and a second		1 4	<u> </u>		3 7
Total 1 (a)	2	1			5	1	1	10
(b) Combined with Diphtheria Antigen Local Authority Medical Officers Private Practitioners	473 238	82 91	16 14	21 6	36	61	73 25	762 3 77
Total 1 (b)	711	173	30	27	39	61	98	1139
Grand Total 1 (a) & (b)	713	174	30	27	44	62	99	1149
(2) Reinforcing Injections (a) Whooping Cough Antigen only Local Authority Medical Officers Private Practitioners								
Total 2 (a)							,	
(b) Combined with Diphtheria Antigen Local Authority Medical Officers Private Practitioners	_	<u> </u>	4	6 2	64	69 7	17 4	156 21
Total 2 (b)		1	4	8	67	76	21	177
Grand Total 2 (a) & (b)		1	4	8	67	76	21	177

Vaccination against Smallpox.—The following Table, I.V.4., is a record of the vaccinations carried out during 1957.

Table I.V.4.

Number of Vaccinations against Smallpox during 1957

	Under 1 year	1 year	2-4 years	5-14 years	15 years and over	Total
Vaccinations Local Authority Medical Officers Private Practitioners	389 3 87	4 15	3 10	4 24		400 4 65
Total	776	19	13	28	29	865
Re-Vaccinations Local Authority Medical Officers Private Practitioners Total	pulsonna		4	19 19	178 182	201

VACCINATION AGAINST POLIOMYELITIS

The main task during 1957 was the vaccination against poliomyelitis of children registered in the lower age groups. An extensive campaign was undertaken in schools and clinics, and by the end of the year 3,922 children had received two injections. During the year, however, the scheme was extended to include children up to the age of 15 years and a great amount of work was necessary to retain the vaccination campaign at high performance, with a programme of vaccination for the new upper bracket age groups.

During 1957 a total of 4,371 children were dealt with. Of these, 3,922! received a complete course of two injections and 449 were given a first injection. At the end of the year the latter were awaiting a second injection.

PARTICULARS OF POLIOMYELITIS VACCINATIONS CARRIED OUT DURING 1957

Age	Local Authority Centres	General Practitioners
1- 2- 3- 4- 5-9 10-14	35 (98) 66 (73) 103 (34) 132 (21) 2,861 (194) 659 (29)	- 1 2 5 48 10
Totals:	3,856 (449)	66

(Children who received one injection only during the year are shown in brackets. The second injections were due during the first weeks of 1958.)

V.—AMBULANCE SERVICE

Table A.S.1 gives the details of the work carried out by the Ambulance Service in St. Helens during 1957.

	Total	10041	2523 2166 2315 2283 2284 2692 2404 2692 2692 2511 2268	29118		Total	8819 7688 8202 7786 9102 8339 8565 8928 9323 8987 8987	103500		
The second secon	als	Hospital Out-patients	1819 1566 1664 1712 1990 1663 2029 1805 1645 1971 1817	21217				GDJ 1111	788 598 1044 714 887 596 1185 987 893	8594
	Service Removals	Hospital Transfers	29 116 28 37 37 33 33 33 33	360		8 EDJ 411	830 1003 661 970 866 802 819 760 1194 942 1128	10735		
G 1957.	General Ser					DDJ 928	1967 1932 2263 1965 2506 2770 2840 2823 2514 2498 2610	29302		
DORING 1957	Ge	Hospital Discharges	193 176 173 161 202 202 162 175 175 175 176 181	2082	ING 1957.	DDJ 274	1071 969 945 854 1393 866 1018 1179 812 981 860	12004		
E SERVICE		Hospital Admissions	259 206 209 209 276 191 231 282 282 248 274	2855	GES DURING	CDJ 234	956 784 905 888 864 1024 899 1077 724 1327 856 761	11065		
AMBULANCE	33	Maternity	86 100 100 100 100 174 86 77 98 97 97 98	986	Table A.S.2. VICE MILEAGES	CDJ 233	1033 776 625 1023 605 786 730 749 800 685 708 836	9356		
	Emergency				SER	BDJ 392	771 724 499 381 416 428 6 230 11	3466		
ALTENDED BY		Sudden	33 33 33 34 34 34 35 35 35	422	AMBULANCE	BDJ 97	737 663 188 235 484 176 398 354 700 543 630	5550		
CALLS AT	ıts	Home	18 18 32 34 37 36 37 36 37 36 37	347	AM	BDJ 828	1167 600 945 872 886 773 426 1019 643 868 868	9872		
<u>ر</u>	Accidents	Works	224 227 238 247 238 168	271		532	287 237 383 383 304 404 495 495	3556		
		Street	24 4 4 4 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6	578		ADJ		3.		
Month			January February March April May June July August September October November December	TOTAL		Month		TOTAL		

Authority for the National Ambulance Competition which had been successful in winning the Regional Competition during 1956 appeared in the final of the tournament. Unfortunately the St. Helens team was not successful but the value of the competitive training was a positive gain and has convinced the Authority that participation in future years should be a permanent feature of the service.

Vehicles.

The following vehicles were in commission at the end of the year:—

Austin, ADJ 532 (year 1949).

Morris, BDJ 97 (year 1950).

Austin, BDJ 828 (year 1951).

Austin, CDJ 233 (year 1952).

Austin, CDJ 234 (year 1952).

Austin, DDJ274 (year 1953).

Austin, EDJ 411 (year 1955).

Austin, GDJ 111 (year 1956).

Bedford, DDJ 928 (year 1954) (Dual-purpose).

Austin, ADJ 437 (year 1936) Austin, DJ 9102 (year 1943)

Retained for Civil Defence purposes.

VI.—MENTAL HEALTH SERVICE

The responsibilities of the Local Health Authority under the National Health Service Act, 1946, for community care in relation to Mental Health include the following:

- (1) The investigation of cases of mental ill-health and, where necessary, the initial care and removal of such cases to hospitals under the Regional Hospital Board in accordance with the Lunacy and Mental Treatment Acts.
- (2) The ascertainment of cases of mental deficiency; the supervision, guardianship and occupational training of such cases and, where necessary, their removal to hospitals in accordance with the Mental Deficiency Acts; and special provisions relating to short-term care of mental defectives under the National Health Service Act.
- (3) Prevention, care and after-care measures in the community in the Mental Health field.

Administration. The powers and functions of the Local Health Authority under the Lunacy and Mental Treatment Acts, 1890-1930, and the Mental Deficiency Acts, 1913-1938, are carried out by the Local Health Committee, which has appointed a Mental Health Sub-Committee.

This Sub-Committee consists of the Chairman and Deputy-Chairman of the Health Committee, together with eight other members of the Health Committee. All powers and duties of the Local Health Authority, so far as they relate to Mental Health and Mental Deficiency, may be referred to this Sub-Committee for report to the Health Committee. It was found convenient, however, during the year to take all matters affecting the Mental Health Service direct to the Health Committee.

Mental Health Staff. The Medical Officer of Health is responsible for the organization and control of the local services under the Lunacy and Mental Treatment Acts, 1890-1930, and the Mental Deficiency Acts, 1913-1938. The day-to-day administration of the Mental Health Department is supervised by an Assistant Medical Officer of Health. Use is also made of the Consultant Psychiatrist at present on the staff of the Local Education Authority, and, where necessary, of Specialist Medical Officers of the Regional Hospital Board.

During 1957 the establishment of the Mental Health Workers was increased by one. It had become obvious that the work of Care and After-Care in the Mental Health Section was becoming too heavy to be borne by an establishment of two workers.

The non-medical staff consists of three Mental Health Workers (one male and two females), two of whom have attended approved courses of training, and one sectional clerk (male). All four are designated as Duly Authorised Officers.

The staff of the Occupation Centre for mental defectives consists of a Supervisor, two Assistant Supervisors and a Guide and General Helper (all female).

For the purposes of Section 5 of the Mental Deficiency Act, 1913, the following have been appointed approved Medical Officers:—

- Dr. Gerald O'Brien, Medical Officer of Health, St. Helens.
- Dr. James H. Walsh, Deputy Medical Officer of Health, St. Helens.
- Dr. M. Joyce Caldwell, Psychiatrist, Child Guidance Clinic, St. Helens Education Authority.
- Dr. N. J. W. Thompson, a local general practitioner with experience in mental deficiency ascertainment.

Co-ordination with Regional Hospital Boards. There are frequent consultations with the Board's Consultant Psychiatrists, and growing use is made of the domiciliary visiting service whereby the Psychiatrists are called in and are able to visit patients in their own homes. In addition, one or other of the Mental Health Workers make frequent visits to the local hospital psychiatric out-patient sessions.

The Local Health Authority is also undertaking, on request, the supervision of patients on trial or on licence from Mental Hospitals and Hospitals for Mental Defectives.

The number of visits paid, the number of cases involved and the number of reports submitted during 1957 were as follows:—

Mental Illness	No. of Cases	No. of Visits Paid	No. of Reports Submitted
Reports on home conditions for licence on trial or discharge		12	8
Mental Deficiency Progress Reports	4	9	9 .
Reports on home conditions for licence on trial or discharge.		16	16
Reports on home conditions for the purpose of Section 11 of the Mental Deficiency Act, 1913.	he	. 30	30

During the year a Mental Health Exhibition was held at Rainhill Mental Hospital and by the invitation of the Regional Hospital Board, St. Helens Mental Health Authority was asked to stage a display illustrating the work of Prevention, Care and After-Care carried out by the Department. In the opinion of those attending there is no doubt that the exhibition was a complete success, and the result arising from the efforts of the Regional Hospital Board and the Health Authority Officers was a striking example of successful, co-operative achievement.

Duties Delegated to Voluntary Associations. No duties of the Local Health Authority have been delegated to voluntary organisations. The St. Helens Mental Welfare Society, however, assists in welfare activities among mental defectives, in connection with the provision of clothing and footwear, day outings, holidays, Christmas parties, etc. The Local Health Authority continued its grant to the funds of the Society for this work. The Women's Voluntary Services also assist in the provision of clothing and footwear.

ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY UNDER SECTION 28, NATIONAL HEALTH SERVICE ACT, 1946

Prevention. In dealing with the problem of prevention of mental illness the activities of the Mental Health Workers were focussed mainly on domiciliary visiting and arranging contacts with suitable organisations for those in need of advice or early treatment.

Close co-operation has been maintained by the Mental Health Service with practitioners and Consultant Psychiatrists of the local mental hospital. During the year 22 attendances were made by the Mental Health Workers of the Local Authority at the local Hospital Psychiatric Out-Patient Clinic.

In addition, a valuable link is provided by frequent case consultations between the Health Visitors of the various districts in the town and the Mental Health Workers.

The importance of preventive Mental Health Services is becoming more generally realised, with the emphasis gradually shifting to the principle of early diagnosis and treatment. Following requests from Consultant Psychiatrists, general practitioners, parents and relatives, and from patients themselves, the Mental Health Workers paid 219 visits during the year in dealing with the following cases:—

- 20 cases with domestic difficulties who were visited and improvement brought about in the home circumstances. In some of these cases material assistance was obtained from various voluntary organisations.
- 22 cases were admitted to geriatric units.
 - 3 cases were persuaded to undergo out-patient treatment.
 - 5 cases were receiving supervisory visits.
 - 1 case was admitted to a voluntary home.
 - 1 case was admitted to a general hospital.
 - 1 case was admitted to a convalescent home.
 - 3 cases were assisted in the provision of clothing and bedding.
 - 1 case was admitted to an epileptic colony.

Care. In this sphere of activity it was found that the majority of the problems dealt with arise in family life as a result of the admission of a member of the family to hospital. Advice and assistance were sought from the Mental Health Department on many occasions by relatives and not infrequently by request of the patients themselves. In many instances at the request of Consultant Hospital Psychiatrists in the area home visits were paid to relatives of in-patients and social histories completed.

During the year under review, a number of elderly people were admitted to geriatric wards, thus avoiding certification and obviating the admission of senile dementia cases to Mental hospitals.

During the year 162 visits were made in dealing with the undermentioned cases:—

- 12 cases of patients in hospitals whose home difficulties were to some extent detrimental to their recovery. Instances of these were National Assistance grants, housing difficulties, property worries, National Insurance and Pension problems and visiting arrangements.
 - 8 cases in respect of which social histories were completed.
 - 4 cases in which special interviews were arranged for the relatives off patients at out-patient clinics.
 - 3 cases where children were involved were referred to the Children'ss Department and/or the N.S.P.C.C.
 - 1 case was referred to the Welfare Services in connection with the care of property.

After-Care. The following summary gives the Local Health Authority's: after-care record during 1957:—

Number on list at 1/1/1957 Discharged persons requesting after-care	. 191 . 69
D 1 . 1 C 1' . 1 0 5 7	260
Deleted from list during 1957	42
Number on list at 31/12/1957	218

After-care presents a wide sphere of activity due to the increased present day tendency adopted by the mental hospitals to admit voluntary rather than certified patients. Numbers of patients are discharged from hospitals weekly, with a consequent load on the Mental Health Services. Rehabilitation of patients is a necessary part of the work of the Mental Health Workers, and in discharging this, contact is made with the Disablement Rehabilitation Service of the Ministry of Labour, Welfare Officers of local firms, and various other organisations.

In dealing with the following cases during the year, 213 home visits were made by the Mental Health Workers:—

- 34 cases requiring further treatment were re-admitted to hospitals.
- 20 cases completely recovered, needing no further after-care service.
 - 1 case was admitted to a voluntary home.
 - 3 cases were helped in finding employment.
 - 4 cases in which families were assisted in dealing with domestic problems.
 - 2 cases in which holidays were arranged.
 - 5 cases were assisted in the provision of food and clothing.
- 40 cases received supervisory visits.

In closing, it would be pointed out that the number of people seeking the aid of the prevention, care and after-care services is increasing yearly. This burden is eased by the fact that a happy relationship exists between the local medical practitioners, the local mental hospitals, the consultant psychiatrists and the mental health workers. During the year under review a total of 777 interviews were conducted in this connection.

THE LUNACY AND MENTAL TREATMENT ACTS, 1890-1930.

The following is a summary of the work undertaken by Duly Authorised Officers under the above Acts, from 1st January, 1957 to 31st December, 1957:

1.	Admitted to an Establishment designated for the purpose by the Minister of Health:	Male	Female	Total
C	(a) On Three Day Orders under Section 20 of the Lunacy Act, 1890	21	13	34
	(b) On Justices' Fourteen Day Orders under Section 21 of the Lunacy Act, 1890	14	22	36
2.	Summary Reception Orders made under Section 16 of the Lunacy Act, 1890:			
	(a) Following detention on an Order under Section 20 or 21 of the Lunacy Act, 1890	20	29	49
-	(b) Admitted direct to a mental hospital on a Summary Reception Order	1	1	2
3.	Notified as an alleged person of unsound mind suffering from mental illness and dealt with as follows:			
	(a) Voluntary Patients	22	26	48
	(b) Temporary Patients		-	eminimum (
	(c) No Order made	5	4	9
4.	Other notified admissions during the year:—			
	Persons normally resident within the County Borough of St. Helens, admitted to Mental Hospitals under the			
	Lunacy and Mental Treatment Acts, 1890-1930	48	47	95

The above figures cannot be taken as representing the true incidence of mental illness in the community since many early cases do not exhibit major symptoms requiring hospital treatment and probably are dealt with very successfully by general medical practitioners and by Consultant Psychiatrists at Out-Patient Hospital Clinics. Such cases may not come under the review of the Mental Health Service.

In addition, a number of cases (not St. Helens residents) are dealt with by virtue of the fact that they have been overtaken by mental illness while in the County Borough of St. Helens. Nine of these cases were dealt with during the year (5 males and 4 females).

The following summary gives the disposal of known St. Helens patients in Mental Hospitals during the year:—

No. of Health Service Patients in Mental Hospitals on 1/1/1957	Male 168	Female 180	Total 348
Admissions during the year	126	138	264
	294	318	612
M. F. Total			
Deaths during the year 10 8 18 Discharges during the year 125 145 270			
Discharges during the year 125 145 270	- 135	153	288
No. of Health Service Patients in Mental Hospitals on 31/12/1957	159	165	324

The number of patients in hospitals at the end of the year is at the rate of 2.9 per 1,000 of the population.

THE MENTAL DEFICIENCY ACTS, 1913-1938

Ascertainment. The total number of cases reported and referred as Mental Defectives from the 1st January, 1957 to 31st December, 1957 was 7. Particulars of these cases are shown in the following Tables.

Table M.H.1.

Cases Reported and Referred

		er 16 ars	16 ye		Total
	M.	F.	M.	F.	Total
(a) Cases ascertained during 1957 as defectives "subject to be dealt with". Action taken on reports from:— (i) Local Education Authorities on children— 1. Whilst at school or liable to attend school 2. On leaving special schools 3. On leaving ordinary schools (ii) Police or Courts (iii) Other sources	2	2			4 - 2 1
Total number of cases reported in 1957	2	2	3		7

Table M.H.2.

Disposal of Cases

	Unde		16 ye	Total	
	M.	F.	M.	F.	Total
(a) Those found "subject to be dealt with". (i) Placed under Statutory Supervision (ii) Placed under Guardianship (iii) Taken to "Places of Safety" (iv) Admitted to Hospitals (b) Those not at present "subject to be dealt"	2	2 	12	graduation of the control of the con	5 - 2
with". (i) Placed under Voluntary Supervision (ii) Action unnecessary	_			_	_
	2	2	3		7

Admissions to Hospitals.—During 1957 the total number of defectives admitted by Order to Hospitals was 7 (6 males and 1 female). The admissions were as follows:

	Une 16 y	der ears	16 y & o		Total
Direct from House	M.	F.	M.	F.	
Under Section 3 of the Mental Deficiency Act, 1913	_	_	1	_	1
Under Section 6 of the Mental Deficiency Act, 1913 Under Section 8 (i) (b) of the Mental Deficiency Act, 1913	1	_	3	- Children	1 3
From "Places of Safety" and Non-Designated Hospitals Under Section 3 of the Mental Deficiency Act, 1913	1				1
Under Section 6 of the Mental Deficiency Act, 1913	_			1	î
	2	_	4	1	7
		July Co.			

Two further cases (male, over 16 years) were admitted to Mental Hospitals under Section 16 of the Lunacy Act, 1890.

At 31st December, 1957, there were 13 cases (7 males and 6 females) awaiting vacancies in hospitals. Two of these cases (1 male and 1 female) were in a "Place of Safety".

Difficulty is still being experienced in obtaining vacancies for cases requiring hospital care, particularly on the male side. In spite of 9 admissions to hospitals during the year the waiting list at 31/12/1957 was 13. These cases have been classified as follows:

Table M.H.3.

	Under 16 years		16 yea	Total	
	M.	F.	M.	F.	
1. In urgent need of hospital care (i) Cot and chair cases		2 	1	1 1 1 -	3 4 2 —
(ii) Ambulant low grade cases (iii) Medium grade cases (iv) High grade cases	<u>i</u> _		1		1 1
	5	2	2	4	13

None of the above cases is considered to be in need of hospital care solely because of poor environment.

Cases in Mental Deficiency Hospitals.—The number of cases from the County Borough of St. Helens who were in Mental Deficiency Hospitals at 31st December 1957, is given in the following table:

Table M.H.4.

			Unde yea		16 years and over		Total						
									M.	F.	M.	F.	
Mental Deficiency	Hos	pita	al —						14.1,				
A.L. TT			*****		*****	*****			_	_	_	4	4
Birkenhead .			•••••	*****			•••••		_	_	1	1	2
Brockhall				*****	•••••	*****			4		22	14	40
Calderstones .			*****	*****	*****		*****			1	18	12	31
Charles	-	•••••	*****						_	_	_	1	1
C U-11										_	2	2	4
Carrana Hall			*****						1		2 3		4
Y T. II			*****	*****		*****	*****				5		5
Mary Dendy Ho	me	B20 0 to 7	p-++		*****		•••••		_	_	2	1	3
Newchurch Hos			*****							1	_	4	5
O1: 8 #			*****	******					1	_			1
Rampton State											_	3	3
י וואו בי							*****		1	_	5	1	7
Swinton	•••••	••••	******	•••••	*****	*****	*****		1	1	_		2
						,			8	3	58	43	112

Total number of Reported and Referred Cases at 31st December, 1957...

The total number of reported and referred cases for whom the Local Health Authority of the County Borough was responsible at the 31st December was as follows:—

Table M.H.5.

,	Unde		16 yea	rs and er	Total	
	M.	F.	M.	F.		
Under Statutory Supervision	22 1	23	35 1 - 22	39 3 1 12	119 4 2 34	
	23	23	58	55	159	

SUPERVISION—Statutory and Voluntary. This work is carried out by the Mental Health Workers/Duly Authorised Officers.

Cases under the Statutory Supervision of the Local Health Authority are visited regularly and reports of the visits submitted to the Medical Officer of Health. In this way, besides maintaining contact with the defective, it is possible for the Mental Health Workers to become aware of changes in family circumstances, etc. The visits occasionally bring to light domestic problems, and in some cases convalescent holidays have been arranged, hospital or general practitioner treatment obtained, and the help of various organisations sought for the mothers of defectives or members of their families. In this connection much work has been done in co-operation with the social services, probation services, the N.S.P.C.C., etc. Any special recommendations which have been made are noted and placed before the Health Committee.

The number of visits made to these cases during the year was 251.

Cases under Voluntary Supervision are also visited at regular intervals. These are cases which have been referred to the Local Health Authority otherwise than under Section 57 (3) and (5) of the Education Act, 1944. The number of visits made to these cases during 1957 was 17.

Guardianship.—Four cases are under the guardianship of parents, relatives or friends. In accordance with the appropriate legislation, these cases are examined by a Medical Officer of the Health Department staff at twelve monthly intervals and are visited by the Mental Health Workers regularly. (Each case is also, of course, on the list of a local medical practitioner.) As is the case with defectives under Supervision, any special recommendations are noted and placed before the Health Committee. During the year 8 visits were made by the Mental Health Workers.

After-Care.—Cases which are discharged from an Order under the Mental Deficiency Acts and return to their homes, are followed up so that assistance can be given in their general rehabilitation. (These cases are usually found suitable employment and make good citizens).

During the year 13 visits were made to 5 such cases.

Classification of Cases under Guardianship and Supervision. In Section A of the following Table, defectives under Statutory and Voluntary Supervision and Guardianship cases have been classified as to their suitability for various types of training, whilst those actually receiving such training at the 31st December, 1957 are shown in Section B.

Table M.H.6.

		Under 16 years		rs and	Total
	M.	F.	M.	F.	
Section A.					
Considered suitable for :— (i) Occupation Centre	17	18 4	9 24 8	10 15 12	54 40 25
	19	22	41	37	119
Section B.					
Number of cases receiving training on 31.12.1957 (i) In Occupation Centre	15	12	9 —	10	46
(III) At notice	15	12	9	10	46

Cases removed from Lists during 1957.—Of the listed cases who were in hospitals or under community care (including Voluntary Supervision) or in "Places of Safety" on the 1st January, 1957, the following ceased to be under any of these forms of supervision as on 31st December, 1957:

Died, removed from area, or lost sight of	Male	Female	Total
	2	—	2
	2	-	2

Short-term Care.—In accordance with the provisions of Ministry of Health Circular 5/52, short-term care was arranged for a number of defectives while their families took their annual holiday or some member of the family was in hospital, etc.

	Under 16 years		16 ye and c	ears over	Total
A duritte d to Niction of Trouble	M.	F.	M.	F.	,
Admitted to National Health Service Hospitals	term entered	1	-	graphonical	1
Admitted to Voluntary Homes, etc.		1	destroyage	1	2
		2		1	3

During the year 301 interviews took place in the Mental Health Department in dealing with parents and relatives of mental defectives seeking advice and assistance.

Occupation Centre. The Occupation Centre is situated at "Stanley House," Sinclair Street, St. Helens, the staff consisting of a Supervisor, 2 Assistant Supervisors, and a Guide and General Helper.

The premises comprise a very large assembly hall (which is utilised as a gymnasium and occupational therapy room for the older defectives), two class rooms for the juniors and one dining room.

Meals are provided through the Schools Meals Service of the Local. Education Authority, the charges being in line with those operating in the schools throughout the Borough.

A free 'bus service is provided for the transport of the defectives to and from the Centre, and they travel under the supervision of members of the Occupation Centre staff.

Pupils are graded according to mental age and ability, and the curriculum includes instruction in handwork, sewing and embroidery, rug-making, singing and dancing. It is felt that an Industrial Centre would greatly improve the facilities for the older type of pupil.

The annual "Open Day" was held on the last day of the Christmas term, as also was the Christmas Party. The latter was provided by the St. Helens Mental Welfare Society, and gifts were presented to each pupil by Father Christmas.

During the summer suitable patients attended a week's camp in Wales, and others were taken on coach trips, funds for these being provided by the above-named Society.

The Centre is open from Monday to Friday of each week, and conforms to the normal terms and holidays which apply to the Primary Schools in the Borough.

	Boro Pu _l		County Pupils		Total	
	M.	F.	M.	F.		
Number of pupils on Register on 1.1.1957	25 1 3 23 18	21 3 1 23 16	2 - 2 1	6 - 6 4	54 4 4 54 39	

During the year discussions were held as to the possibility of enlarging the Occupation Centre on its present site, since it was felt that the accommodation was becoming inadequate, especially the provision for the segregation of the pupils in the older age groups. It was also considered that there were inadequate facilities for training in handicrafts.

It was found that extension on the present site was impracticable and inadvisable due to long-term road planning in the area which affected the existing site of the Occupation Centre. A survey of other available premises in the town proved that these were unsuitable for adaptation as a Centre, and the decision was taken by the Health Committee to investigate the possibility of building a new Centre on the outskirts of the Borough.

VII.—TUBERCULOSIS

Incidence. In 1957, 85 persons were notified as suffering from pulmonary tuberculosis, 31 less than in the previous year. Twenty cases of non-pulmonary tuberculosis were also notified during the year.

The total number of new cases was 120. This figure includes 15 cases added to the Register from other sources, e.g. Death Returns, etc. The total number of new cases for the previous year was 129.

Mortality. 18 deaths in 1957 were due to tuberculosis, of which 2 were caused by the non-pulmonary form of the disease.

The death rate from tuberculosis was therefore 1.6 per 10,000 of the population.

Table T.B.2. shows the incidence and death rate figures from 1938.

Table T.B.1.
Particulars of new cases and of deaths during 1957.

		New	Cases		Deaths				
Ages	Pulr	nonary	Non-Pu	ilmonary	Pulmonary		Non-Pulmonary		
	Males	Females	Males	Females	Males Females		Males	Females	
Under I year 1 — 5 — 15 — 25 — 45 — 65 — 75 —	1 - 2 19 29 29 3	2 3 11 13 12 3	4 5 5 5	1 2 1 1 2 -		1 2 1			
Totals	54	45	14	7	11	5	2		

Table T.B.2.

Number of cases notified and number of deaths each year, 1938 to 1957

	No. of notification	Primary s received.	Dea	ths	Death Rate per 10,000 of population		
Year	Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary	
1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957	74 57 96 81 80 107 94 81 101 111 98 96 104 87 99 104 109 71	35 39 44 33 25 24 27 25 24 10 15 16 16 17 17 20 3 7 6 20	57 49 67 46 59 64 48 58 48 68 63 58 46 33 37 27 28 24 12 15	13 21 12 23 15 12 12 13 4 9 7 7 4 8 3 4	5.3 4.6 6.5 4.5 5.8 6.4 4.9 5.8 4.6 6.4 5.7 5.2 4.1 3.0 3.4 2.5 2.5 2.1 1.1	1.2 1.9 1.2 2.2 1.5 1.2 1.3 0.4 0.9 0.6 0.6 0.3 0.7 0.3 0.4 0.1 0.4 0.1	

Tuberculosis Dispensary and Chest Clinic. The administration and clinical work of the tuberculosis service is carried out at Bank House, Claughton Street, under the supervision of the Area Chest Physician appointed by the Liverpool Regional Hospital Board. This officer is responsible to the Local Authority for work under that part of Section 28 of the National Health Service Act, 1946, which deals with the care and after-care of patients suffering from tuberculosis. The Welfare Officer, who is wholly employed by the Local Authority, occupies an office at the dispensary. Close liaison is therefore possible between the work of the Regional Board and that of the Local Authority.

During 1957 there were 5,983 attendances at the Dispensary, an increase of 1,426 over the previous year. A further 897 attendances were made for pneumothorax and pneumoperitoneum treatment.

Particulars of St. Helens cases on the Dispensary Register are set out in Table T.B.3.

Table T.B.3.

Register of St. Helens cases of Tuberculosis during 1957.

	Pulmonary	Non- Pulmonary
1. No. of cases on Tuberculosis Register on 1/1/1957	834	121
2. No. of cases added to the Register during 1957— (i) Formal Notifications	85	20
from other sources— (a) From Local Death Returns (b) From Registrar General's Death Returns (transferable	10	
deaths)	1	1
(c) Posthumous Notifications (d) Transfers from other areas	13	_
(e) Other sources	_	
3. No. of cases removed from Register during year— (a) Recovered (b) Deaths—	2	-
(i) Certified as due to Tuberculosis (ii) Other Causes	16	2
(c) Transferred to other areas or lost sight of	10 916	140

Institutional Treatment. 87 patients from St. Helens were admitted to Eccleston Hall for treatment during the year 1957. There were 4 in-patient deaths of St. Helens cases during the twelve months.

VIII.—PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Three meetings of the Care and After-Care Sub-Committee were held during the year. The Sub-Committee consists of the following:—

5 Members of the Health Committee.

One representative from each of the following bodies:

The National Assistance Board

The Ministry of Labour and National Service.

The British Legion.

The Soldiers', Sailors' and Airmen's Families Association.

As in previous years the specialised knowledge of the co-opted members proved of great assistance in the work of the Committee. The work during the year was concerned with the welfare and assistance of both tuberculous and non-tuberculous patients.

Provision of milk as extra nourishment. The scheme for the provision of additional milk which was started in 1950 was continued during the year. Eligibility for issue in each case was approved by the Chest Physician. A remission of charges was made according to a scale approved by the local authority. Forty-one patients (1 being an observation case) received milk during the year, of whom 21 were new cases and 20 old cases. Three cases were supplied with 2 pints of milk daily and 35 cases with 1 pint daily, for periods varying from 4 to 12 weeks.

Provision of Nursing Requisites. As approved by the Health Committee various articles of nursing requisites are available, namely, air rings. urinals, bed pans, rubber sheetings, bed rests, commodes, bed cradles, beds, mattresses, etc. These articles are issued on loan in accordance with charges approved by the Health Committee.

The number of patients using the Nursing Equipment Loan Service during the year was 331. The total fees collected during the year was £45. 16s. 1d.

During the year the following gift was received for use in the After-Care Service:—

1 Chair Commode

Nursing equipment was supplied on loan to 3 cases of paraplegia being nursed at home following discharge from Orthopaedic Hospitals.

Home Shelters. Home shelters are available for loan to tuberculous patients. Lighting and heating installation is provided by the Local Authority but the cost of current consumed is borne by the patient.

During the year a shelter was erected for a tuberculous patient who had been discharged from Eccleston Hall Hospital but was still on complete bed rest and in need of open air treatment.

Colonisation. Provision is made for the maintenance and training of selected cases in tuberculosis colonies. One patient, first admitted to hospital in 1949 and colonised in May 1954 by agreement with the Health Committee, is still resident in the East Lancashire Tuberculosis Colony, payment being made by the Local Authority at the rate of £1 14s. 6d. per week.

Convalescent Treatment

(a) Tuberculous Patients. Several applications were made on behalf of tuberculous patients for convalescent treatment. Two such patients were admitted under the scheme operating at their place of employment to convalescent homes for periods of two weeks. Another patient and his wife were admitted through the British Legion to a Weston-Super-Mare Hostel for two weeks.

A third case was admitted for two weeks convalescence to the Miners' Home, Blackpool. One female patient was admitted through the St. Helens District Nursing Association to the Lear Home of Recovery, Hoylake, for a period of two weeks.

(b) Non-Tuberculous Patients. Application was made on behalf of two non-tuberculous female patients to the St. Helens District Nursing Association for convalescent treatment and both were admitted for two weeks to the Lear Home of Recovery, Hoylake.

Application for convalescent treatment was made on behalf of a school child aged 12 years to the Ormskirk Children's Hospital and she was admitted for a period of three months. Application was also made for convalescent treatment over the Christmas period for six children aged from 3 years to 7 years and they were admitted on 19th December, for a period of two weeks. Application was made on behalf of a female patient to the Rufford Convalescent Home and she was admitted for a period of five weeks.

Occupational Therapy. Under Section 28 of the National Health Service Act, the Local Authority operate a scheme for domiciliary occupational therapy for tuberculous patients.

In the absence of a qualified Handicrafts Instructor the work is undertaken by the Welfare Officer and there has been considerable expansion of this Service. Informal handicraft classes are held at the Chest Clinic and home training has also been undertaken. The schedule of handicrafts includes leather work, rugmaking, embroidery, knitting, woodwork, basketry and the making of lampshades, soft toys and artificial jewellery, etc. Samples of completed work are on view throughout the year at the Chest Clinic.

Raw materials are purchased and issued to patients who are allowed to repay the cost by instalments. Pensioner patients are already provided with raw materials by the War Pensioners' Welfare Services or Regimental Funds and the local scheme ensures that non-pensioners may be similarly helped. Small hand-weaving looms and leather work tools, etc. have been provided on free loan.

During the year many patients have used this service and various articles have been purchased to the value of £787 12s. 5d.

Initial free issues (varying from 5/- to £2 0s. 0d.) totalling £16 16s. 1d. have been made to 23 patients.

Without doubt the provision of this scheme has been much appreciated by the patients and has helped very considerably in their recovery and ultimate resettlement in employment. Welfare. During the year the Welfare Officer advised and assisted patients and their relatives attending the Chest Clinic and weekly visits were paid to Eccleston Hall Hospital in order to help in-patients with personal problems. Home visits were made to both tuberculous and non-tuberculous patients.

The following is a summary of the visits paid by the Welfare Officer:

Visits to tuberculous patients	• • • •	••••	• • • • •	••••	185
Visits to non-tuberculous patients		••••	••••	••••	76
Visits to Eccleston Hall Hospital		••••	••••	••••	41
	Tota	1	••••	••••	302

There were 448 office interviews.

Close contact was maintained as in previous years with other statutory bodies and voluntary organisations. Some examples of this work are given below.

Statutory Bodies

Housing Department. During the year 22 families (in which one or more members were suffering from tuberculosis) were notified to the Housing Department as being in need of re-housing. This figure includes some families who were already on the Corporation's list for re-housing.

The Housing Committee again agreed to the allocation of 24 houses per annum for the priority housing of cases suffering from tuberculosis. Details of the position in 1957 are given below:—

Tuberculous patients on the housing list of the Local Authority,							
1/1/57	17						
New cases added to list	5						
Allocations of Council houses	7						
Number of patients finding their own accommodation	1						
Number of applicants who have died	1						
Total on Tuberculosis Housing List—31/12/57	13						

Application was made on behalf of a tuberculous patient to a local firm by whom he was employed, for suitable re-housing. He was given a satisfactory exchange of house.

Ministry of Labour. As in previous years the co-operation between the Chest Clinic staff and the Disablement Rehabilitation Officers (male and female) proved very successful.

15 male and 8 female patients were added to the Disablement Register during the year.

7 male and 11 female tuberculous patients were placed in employment during the year. Periodic meetings have been held between the Disablement Resettlement Officers, Chest Physician and Welfare Officer for the purpose of discussing types of work suitable for tuberculous patients fit for employment.

Training Courses for Patients. During the year 1 patient was admitted to an Industrial Rehabilitation unit for a course of approximately ten weeks to test his adaptability and interest for specialised work after which time he was accepted for training at a Government Training Centre.

One patient, after a period of rehabilitation was admitted to a Government Training Centre to train as a cabinet maker. He was later placed in employment with a local firm.

Without need for industrial rehabilitation 1 female patient was admitted to a Commercial College for training as a Comptometer Operator and another female patient was admitted for training in Shorthand and Typing. They have both been placed in employment with local firms.

National Assistance Board. Patients suffering a loss of income in order to undergo treatment for pulmonary tuberculosis and thus becoming eligible for the higher rate of allowance, were referred to the Board as a matter of routine. 42 such cases were referred during the year.

In addition "Exceptional Needs Grants" were made to tuberculous cases as follows:—

Bedding		 		2 patients
Footwear		 •••••		2 patients
Tarrier • 1				
Spectacles grant		 	•••••	2 patients
Pocket money allowance	•••••	 		2 patients
House furnishings		 		1 patient

Non-tuberculous patients were assisted as follows:—

Supplementary allowances	 	 5 patients
Extra nourishment allowances	 	 5 patients

Throughout the year the National Assistance Board Officers gave all possible help to tuberculous and non-tuberculous patients, and co-operated closely with the Welfare Officer.

Ministry of Pensions and National Insurance. Close liaison was maintained with the officers of this Ministry in order to ensure that all possible facilities were available through these agencies to tuberculous and non-tuberculous patients.

Ministry of Health. Application was made to the Ministry of Health on behalf of three handicapped children for supply of invalid wheel chairs and in each case, suitable chairs were supplied. Application was also made on behalf of a patient suffering from Chronic Rheumatoid Arthritis and a wheel chair was supplied.

Home Help Service. During the year 3 cases of tuberculosis and 2 non-tuberculous cases were referred to the Home Help Service.

Voluntary Organisations

British Red Cross Society—Emergency Help Service. 9 recommendations were made for invalid food parcels for pensioner patients during the year and parcels were provided in each case for periods varying from 6 to 12 months at approximately two-monthly intervals.

The Emergency Help Service also helped many pensioner patients with bedding, clothing and occupational therapy materials.

Other Voluntary Agencies. Help with bedding, clothing, loans, etc. was given by the following organizations:—

British Legion, Forces' Help Society, Royal Air Force Association, Royal Navy Benevolent Trust, S.S.A.F.A.

Special mention should be made of the kindness and willingness to help of all the local branch secretaries of these organizations.

Several patients were referred to the St. Helens Council of Social Service for advice.

Voluntary Fund.—During the year several members of the Care and After-Care Sub-Committee and other welfare workers assisted the Welfare Officer and the Tuberculosis Health Visitor in maintaining a voluntary fund. This fund (The Home Patients' Voluntary Welfare Fund) is placed at the disposal of the Care and After-Care Sub-Committee to assist patients in ways outside the scope of the Local Authority in its statutory capacity. The fund derives its income from voluntarily organised whist drives, dances and from donations, etc. Invalid foods have been purchased at regular intervals and 126 food parcels have been distributed to necessitous non-pensioner patients and their dependants. At Christmas, presents were purchased and distributed to children whose fathers were unable to work because of tuberculosis. These gifts have undoubtedly been much appreciated. In one case radio was installed by Rediffusion in the Chalet provided for a tuberculous patient and cost of installation and rental charges were paid from the voluntary fund. Pocketmoney allowances were also given from the fund to 3 patients admitted to convalescent homes.

B.C.G. Vaccination (contact scheme). During 1957, 174 cases received B.C.G. vaccination at the Chest Clinic in St. Helens.

B.C.G. Vaccination of School Children

During 1957, 106 school children received B.C.G. vaccination at the Corporation's Clinics.

IX—VENEREAL DISEASES

The Special Treatment Centre is administered by the Liverpool Regional Hospital Board, but male and female nurses at the Centre continued to be provided by the Corporation under agency arrangements.

The following statement shows the number of cases dealt with at the Centre during the year 1957, in comparison with the previous year. This includes cases from outside the Borough who may receive treatment at the St. Helens Centre.

Table V.D.1

		1956		1957	
		M	F	M	F
lst Ja	of cases under treatment or observation on inuary of new cases (including cases previously	32	41	21	35
r	removed from the register who returned for further observation or treatment) and Transfers of cases discharged after completion of treat-	66	35	83	43
t	nent or transferred to other centres or ceased to attend	77	41	80	44
١	vation on 31st December	21	35	24	34
(a) I	For consultation or treatment by Medical OfficersFor intermediate treatments	439 100	363 34	498 93	322 26

Table V.D.2 shows the number of cases of definite venereal disease treated for the first time at the Centre during each of the past ten years. This table excludes cases which had received treatment previously at other Centres, and also cases removed from the register in previous years who returned for treatment or observation for the same infection.

Table V.D.2

Number of new cases of Venereal Diseases dealt with during 10 years, 1948 to 1957:

Year	Syp	hilis	Soft C	hancre	Gonorrhoea		Total
I ear	M	F	M	F	M	F	lotai
1948 — 1949 — 1950 — 1951 — 1952 — 1953 — 1954 — 1955 — 1956 — 1957	25 14 4 3 2 4 3 3 2 4	25 15 7 4 4 7 2 4 2 5	- - 2 1 - 1		53 21 17 13 16 20 10 16 14 18	9 9 1 2 9 9 2 2 9 8	112 59 29 22 33 41 17 26 27 36

During the year, 79 male and 42 female patients attended the Clinic for the first time, as compared with 64 male and 33 female in 1956. The following table shows how these cases were introduced to the Clinic for treatment or observation:—

Introduced by	Male	Female
General Practitioners	31	8
Male V.D. Clinic	1	11
Female V.D. Clinic	2	and the same of th
Parents	1	6
M. & C.W. Clinic	phay-ments	1
Hospitals	3	2
Moral Welfare Societies, Welfare Officers,		
Probation Officers, etc		8
Patients' own initiative	41	2
Not stated	gastativascoli	4
	79	42

In 1957, the percentage of patients attending the Centre for the first time who presented themselves for treatment on their own initiative was 51.9% in the case of male patients, compared with 48.4% in 1956, and 4.7% in the case of female patients as compared with 6.0% in 1956.

Of the total number of new patients who attended the clinic for treatment in 1957, 26 were non-residents of the Borough.

Forty-five (24 male, 21 female) new cases attended for investigation only to exclude Venereal Disease, representing 37.1%, compared with 42.2% in 1956. In each case (with the exception of 11 children) there was a history of exposure to infection of Venereal Disease.

The following table V.D.3 gives a summary of the services rendered at the treatment centre during the year, the classification showing the areas in which the patients resided.

	Table V.I	0.3.		
Name of County,			Other	
County Borough, etc.	Syphilis	Gonorrhoea (Conditions	Total
St. Helens	5	20	70	95
Lancashire County	3	1	13	17
Warrington		4	distribution with	4
Widnes		1	1	2
Leeds	1			1
London	Manney-Harried		1	1
Huddersfield	gladification of the state of t	600AbA	1	1
Total	9	26	86	121

Contact Tracing.

During the year continued investigation was carried out in the survey and follow-up of cases of venereal disease in the Borough. The following tables with appropriate commentaries show the work done by the venereal diseases welfare officers of the Local Authority.

Table V.D.4

Cases of Venereal Disease of less than one year's infection, which received treatment at the St. Helens Special Treatment Centre during 1957.

	Total		Source of Infection Pick-up					
Discase	No. of Cases	Marital	Public House	Friend	Dance	In the Street	Not Stated	
Male Clinic: Syphilis	- 18	5	<u> </u>					
Female Clinic: Syphilis	- 8	4			_		<u> </u>	
Totals	26	9	5	7	2	2	1	

With reference to the previous table, efforts were made to trace the contacts of these cases of venereal disease with the following results:

MALE CLINIC

During the year, eighteen cases of Acute Gonorrhoea were recorded involving fourteen patients.

Marital Infection.

In all five cases, extra marital coitus was denied but the history indicated the husband was responsible for infecting his wife, who later returned the disease to her husband. Two patients were each infected twice from this source of exposure. The husband's original infection was in two cases traced to extra marital coitus. The nominated contacts were persuaded to attend the Clinic and were found to be suffering from Gonorrhoea.

Friend.

In two cases the male patient was the contact infecting his girl friend, the original infection being from "Pick-ups". One male patient recorded three new infections, one from a "Pick-up" at a dance and two from the girl friend he had infected.

"Pick-ups".

As the association of the contact in these infections is of a casual nature, patients are usually unable to furnish sufficient details to establish identity. The contacts in three cases appeared to be prostitutes.

FEMALE CLINIC

Eight cases of Gonoccoccal Infection were recorded during the year.

Marital Infection.

Four cases were classified under this heading. In three cases, the husband was the contact. In the other case, no information was available. Extra marital exposure was denied in all cases.

Friend.

Of the three cases recorded, two were infected by male patients. In the other, referred by a General Practitioner, the male friend was stated to be receiving treatment elsewhere.

Not Stated.

History of any previous infection was not obtained in this case and was nominated as a contact by a male patient.

Table V.D.5

Particulars of defaulters and action taken during the year 1957 are shown below:

					Syp hilis	Gonorrhoea	Other Conditions	Total
Male Clinic. No. of defaulters	500 F74	*****	******	90.0.0	4 4		1	5
Female Clinic. No. of defaulters No. persuaded to re-attend	sebece quipere	00000	******	******	7 6	1		8 7

SUMMARY AND OBSERVATIONS

Marital Infections.

Contacts in this category create a very difficult and delicate problem fraught with complications. The husband infects his wife, he having been infected from another source. This is apparent when the husband returns suffering from another fresh acute infection admitting no extra marital exposure. Before the husband will co-operate or agree to his wife being approached with the view of attending the clinic, he must be assured strict confidence will be observed, namely information in regard to the source of his original infection, or the fact that he is or has been suffering from such a disease will not be disclosed.

This can only be achieved through teamwork, the Consultant playing the major role once the patient has arrived at the Clinic. Any departure from confidence may severely injure relationship between husband and wife, or may even lead to the break-up of the home.

Friends.

In some respects, the manner of handling contacts classified under this heading, is similar to those mentioned above. Where there is a prospect of marriage, careful and sympathetic management is required if successful results are to be obtained.

Summary.

Patients have, during the year, co-operated admirably. No difficulty was experienced in obtaining information leading to the identity of contacts. With the exception of those returned under the heading of "Pick-ups", all nominated contacts attended the clinic for examination.

Summary—Survey of Male Acute Gonorrhoea Cases, 1948-1957.

In this survey of male cases of Acute Gonorrhoea, 1948-1957, it is observed that among patients in occupations involving travel, the morbidity rate was 31.2%. Other occupations, labourers, 25.6%, miners 29.1%. During the last five year period, the rate increased in lorry drivers and decreased in labourers and miners.

The difference between the unmarried and married is—unmarried 62.05%—married 37.9%.

The place where the carrier of the infection was encounted is:—

In Public Houses	•••••	31.2%
In the Street	•••••	16.9%
Prostitutes		13.8%
Marital Exposure	*****	14.8%

In St. Helens, street prostitution accounted for only one case in the ten year period. In this class the largest number came from Liverpool, 66.6%, and Manchester, 11.1%.

Infection acquired abroad was 7.4%.

The following table is an analysis of the places where the carrier of the infection was encountered. This relates to cases of venereal disease of less than one year's duration who received treatment at the Clinic.

		Syp	hilis	Gonor	rhoea
		M	F	M	F
•••••				2	2
tal				5	4
		***************************************		2	
			g-a	2	
				2	
•••••				2	1
•••••	•••••			1	<u> </u>
				1	
Mar	1			1	darm, market
				armed	1
				4.0	
				18	8
	 Mar		M — — — — — — — — — — — — — — — — — — —	tal — — — — — — — — — — — — — — — —	M F M 2 tal 5 2 2 2 1 Man 1

X-MATERNITY AND CHILD WELFARE

Care of Mothers and Young Children

NOTIFICATION OF BIRTHS.—Under Section 203 of the Public Health Act, 1936, 1,884 live births and 66 still-births were notified during 1957. In respect of these, 1,945 notifications were received from midwives and 5 from doctors. The corresponding figures for 1956 were 1,881 live births and 68 still-births, 1,942 notified by midwives and 7 by doctors.

The total number of live births registered as belonging to St. Helens was 1,903, giving a birth rate of 17.2 per 1,000 of the population for the year 1957. The corresponding rates over the past 5 years were respectively 17.8 in 1952, 17.5 in 1953, 17.0 in 1954, 16.0 in 1955 and 16.8 in 1956.

INFANTILE MORTALITY.—During 1957 the deaths occurred of 59 infants under the age of one year, giving an Infantile Mortality Rate for that year of 31.0 per 1,000 live births. The corresponding rates during the preceding five years were 37.6 in 1952, 43.8 in 1953, 41.0 in 1954, 32.9 in 1955 and 27.4 in 1956. The average for the five years 1953-1957 was 35.2. The Infantile Mortality Rate for England and Wales for 1957 was 23.1 per 1,000 births.

Table M.C.W.1 below shows the ages at death and causes of death in these infants. It will be noted that 39 of the infants died before the age of one month (the neo-natal period), 6 died between 1 and 3 months, 7 died between 3 and 6 months, 5 died between 6 and 9 months, and 2 died between 9 and 12 months.

By far the greater number of deaths, therefore, occurred within the first three months. The following tables present a statistical review of the deaths with remarks on the apparent causal factors.

Table M.C.W.1

,		Causes of Death						
Ages at which death occurred	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	Total	
Birth to 24 hours	1	9	6		Market Market	3	13	
1 day to 7 days	6	7			-	4	17	
8 days to 1 month	1	3	2	3	developmentale	-	9	
1 month to 3 months		2	2	1	1	April Committee	6	
3 months to 6 months	2		3	1		1	7	
6 months to 9 months	1	•	1	3		4000000000	5	
9 months to 12 months				- Company and American	1	1	2	
ALL AGES	11	21	8	8	2	9	59	

The following Table M.C.W.2 shows the time of the year at which the various deaths occurred.

Table M.C.W.2.

Month when death occurred of children under one year.

		1	Causes	of Deat	h	1	
Month during 1957 when death occurred	Congenital	Prematurity	Pneumonia	Infection	Accidents	Other Causes	Total
January	3	3		1		1	8
February		1			_	1	2
March	2	1	production and	3	—	1	7
April	***************************************	************	2		•	1	3
May	-	3	1				4
June	2	1	1		With the Will	2	6
July	_	3		1	-		4
August	1	1		1	1	1	5
September		3				1	4
October	2		1	-		gradusticos gr	3
November	discribed in the second	2		1			3
December	1	3	3	1	1	1	10
TOTAL	11	21	8	8	2	9	59

The 8 deaths due to Infection (other than Pneumonia) were caused by Gastro-Enteritis 3, Meningococcal Meningitis 1, Acute Bronchitis 1, Acute Encephalitis 1, Haemorrhagic Cellulitis 1, and Infective Hepatitis 1.

The 9 deaths due to other causes were as follows:—Fibrocystic Disease of the Pancreas 2, Asphyxia Pallida 3, Atelectasis 3, and Erythroblastosis Foetalis 1.

The 24 deaths due to prematurity were specially investigated. Table M.C.W.3 shows the birth weights of these infants, the periods of pregnancy at which these premature births occurred, and the causes of the prematurity.

Table M.C.W.3.

Analysis of Infant Deaths due to Prematurity

a) Weights at Birth of Premature Infants

Less than 2 lbs		********		3
2 lbs. to 2 lbs. 6 ozs.			•••••	2
2 lbs. 7 ozs. to 3 lbs. 4	ozs	•••••		8
3 lbs. 5 ozs. to 4 lbs. 6	ozs	•••••		_ 5
4 lbs. 7 ozs. to 4 lbs. 15	ozs			2
5 lbs. to 5 lbs. 8 ozs.	•••••			4
	Total			24

(b) Periods of pregnancy at which premature births occurred

Period	of	pregnancy:	
		eks	

iou or progr	lancy	•				
22 weeks	•••••					3
26 weeks	•••••					2
27 weeks						2
28 weeks				••••	•••••	5
30 weeks		••••		•••••	•••••	2
32 weeks						4
35 weeks						4
36 weeks						2

		T	otal			24
		4	D COLL	*****	*****	

(c) Causes of Prematurity

Toxaemia of Pregnancy		 4
Ante-Partum Haemorrhag	ge	 2
Twin Pregnancy		 8
Severe debility in mother		 4
No apparent cause		 6
. Total		 24

Twenty-four premature infants died during the year, 21 deaths being due to prematurity, 2 due to congenital defect, and 1 to accident (Asphyxia due to regurgitated feed.)

It is still a significant factor that Prematurity remains the cause of the largest number of Infant Deaths (21). In 13 cases, the infants weighed 3 lbs. 4 ozs. or less at birth, and 14 infants were born at 30 weeks pregnancy or less. Each case is carefully investigated by the Health Department Obstetricians, Consultant Paediatrician, or Maternal and Child Welfare Workers, and no effort is spared either by the Hospital Premature Units in the area, or the special Premature Domiciliary Services to do all that is possible for these babies. It is also significant that 23 of the 66 recorded still-births were considered to be due to prematurity.

The following table M.C.W. 4 shows the position regarding ante-natal care of mothers, and also shows whether the mothers were employed during pregnancy. It will be seen that no significant factor affecting the problem can be attributed to local conditions of pre-natal environment.

Table M.C.W.4.

Source of ante-natal care	Mothers working during pregnancy	Mothers not working during pregnancy
Midwife	1 7 4 5	2 20 15 3 2
TOTAL	17	42

The two mothers who received no ante-natal care went into very premature labour at 22 and 26 weeks. One of these mothers was not married.

STILL-BIRTHS.—The number of still-births registered as belonging to the Borough was 68. All still-births were investigated, and the causes of intrauterine deaths were attributable to the following conditions:

Prematurity		••••			••••	23
Toxaemia of Pregnan	ісу	• • • • •		••••	••••	11
Rh. Negative	•••••		•••••			2
Hydrocephaly	••••	• • • • •	••••	••••	••••	3
Anencephaly	••••			• · · · ·	••••	3
Breech Delivery	••••		••••		••••	3
Ante-partum Haemo	rrha	ge	••••	••••	••••	5
Post-Maturity	*****					2
Prolonged Labour			• • • • • • • • • • • • • • • • • • • •			1
Prolapsed Cord	• • • • •	••••		••••	••••	2
Twin Delivery	•••••		•••••		•••••	4
Influenza in Mother		•••••	•••••	•••••	•••••	1
Diabetes in Mother	•••••					1
Cause not known	•••••		•••••	•••••	•••••	7
						68

MATERNAL DEATHS.—During 1957 1 death was recorded by the Registrar General as resulting from childbirth or accidents of pregnancy, giving a maternal mortality rate of 0.51 per 1,000 live and still-births. (The maternal mortality rate for the previous year was 1.04.)

This death was due to Generalised Peritonitis and Abscess of Uterus following Abortion. The patient was admitted to hospital with very early antepartum haemorrhage, and aborted. She developed an abscess of the Uterus and generalised Peritonitis and died 6 days after the abortion, despite all treatment. An inquest was held and a post-mortem examination was carried out which confirmed the diagnosis of Peritonitis. The cause of the abortion was not ascertained and an open verdict was returned.

INFECTIOUS DISEASES IN MOTHERS AND CHILDREN

Puerperal Pyrexia.—Three cases of Puerperal Pyrexia were notified during the year, 2 cases occurring on the district and 1 in hospital. The district cases were transferred to the care of the District Nursing Association, and all cases recovered.

Pemphigus.—No case was reported during the year.

Ophthalmia Neonatorum.—One case was reported during the year. This case occurred on the district, received treatment at home from the general practitioner, and recovered without impairment of vision.

Other Infectious Diseases.—The following Table, M.C.W.5., shows the number of cases of infectious diseases which occurred in children under 5 years of age, and the deaths resulting therefrom.

1-5 years Under 1 year Cases Deaths Cases Deaths Scarlet Fever ___ 70 Diphtheria ___ 94 1231 Measles ____ 156 Whooping Cough ___ 28 Ophthalmia Neonatorum 3 6 Meningococcal Infections

Table M.C.W.5.

CHILD WELFARE CLINICS.—Clinics for children under 5 years of age are held on 9 sessions weekly at 8 centres.

70.1% of the notified births in 1957 attended Child Welfare Clinics and the number of children under 1 year of age who attended was satisfactory. Table M.C.W.6. shows attendances at the various Maternity and Child Welfare Clinics.

Immunisation against diphtheria is carried out at the Child Welfare Clinics as well as at the special sessions held at the School Clinic in Claughton Street, and at the outlying district clinics.

ANTE-NATAL CLINICS.—At the end of the year, ante-natal clinics were being held 9 times weekly at 8 centres.

Table M.C.W.6.

Attendances at Maternity and Child Welfare Clinics during 1957

Child Welfare Clinics. No. of children who attended for the first time during the year and who, on the date of their first attendance, were under 1 year of age	1322
Percentage of births represented by the number of children who on the date of their first attendance were under 1 year of age	70.1
Number who attended and who were born in :— (i) 1957 (ii) 1956 (iii) 1952-1955	1083 849 404
No. of attendances by children :— (i) under 1 year of age	12379 1533
Ante-natal Clinics. Medical Officer's Sessions including Specialist Ante-Natal Clinics:— No. of expectant mothers who attended	1599
No. of attendances by expectant mothers	7911
Midwives' Sessions (no medical officer being present):— No of expectant mothers who attended	19 88
Percentage of total births (live and still) represented by the number of expectant mothers who attended either the Maternity and Child Welfare Centres or the Ante-natal Clinics	82.9
Post-Natal Examinations at Ante-Natal Clinics:	114
No. of mothers who attended	114 123
Gynaecological and Post-natal Clinic. No. of mothers who attended	227
No. of attendances	307
Sunlight Clinic. No. of children who attended	34 677

In 82.9% of the total notified births during 1957 the mothers had attended one or other of these clinics.

Expectant mothers have routine blood tests carried out at these clinics. The tests are for Blood Grouping, Rhesus factor and Kahn Reaction. During the year 507 specimens were sent for examination. Of these 363 were Rhesus Positive, 133 were Rhesus Negative, 11 Genotype Reaction, and 3 had Positive Kahn Reactions. When a positive or doubtful Kahn Reaction is obtained, a confirmatory Wasserman Reaction is then carried out. Following this procedure it was found that 1 had negative Wasserman Reaction, and 2 positive Wasserman Reactions. The latter patients were referred to the Special Treatment Centre.

Of the 133 patients who were Rhesus Negative in type, only 10 had Rhesus Antibodies present. The importance of this test lies in the fact that the doctor in charge of the confinement is forewarned that the baby may need an exchange transfusion immediately after birth. Rhesus Negative blood may be obtained from the Regional Blood Transfusion Centre before the confinement in readiness for either the mother or the baby. Of these 10 patients, 2 babies needed to have an exchange transfusion, one of whom unfortunately died soon after the transfusion. The other recovered.

In addition to the ante-natal clinics a Specialist Clinic, staffed by two specialist obstetricians attached to the Cowley Hill Maternity Hospital, is held fortnightly. Patients are referred for Consultant advice by Medical Officers of the Local Authority staffing the ordinary ante-natal clinics, and the work done has proved to be of great value. During 1957, 111 patients were referred to the Centre for Consultant opinion.

The Midwife's ante-natal session at Jersey Street Centre was continued during the year. In 1957, 19 patients made 88 attendances.

GYNAECOLOGICAL AND POST-NATAL CLINIC.—This clinic is held once a week at the Hardshaw Street Centre and serves the double purpose of investigation of gynaecological conditions associated with pregnancy and as a clinic for post-natal supervision. During 1957, 164 patients visited this clinic for post-natal examinations. Post-natal supervision is, however, also carried out at the Infant Welfare and Ante-Natal Clinics held in the outlying districts. The total number of women who received special post-natal supervision was 294.

The number of gynaecological patients attending this clinic was 63 (143 attendances).

Patients who needed operative treatment were referred to the out-patient departments of the local hospitals.

At this clinic patients may also receive advice on birth control methods when such is desirable for medical reasons. The following statement indicates the number of patients to whom such advice was given, and the reasons:

Severe debility caused by frequent pregnancies								
Tuberculosis	••••	••••	••••	••••	••••	••••	****	4
Severe Anaemia		••••	••••	••••	••••	••••	••••	5
Renal Disease	••••	••••	••••	••••	••••	••••	• • • •	9
Mental Instability	• • • • • •		••••	••••	• • • • •	••••	• • • • •	5
Mother Rh Negative	with	h an	tibod	lies	•••••	•••••	•••••	1
Heart Disease	•••••	•••••	•••••		•••••	•••••	•••••	1
Hyperthyroidism	*****	*****		•••••		•••••	*****	3

Total 37

Three patients sought advice during 1957 because of infertility, and 2 patients attended in the early stage of pregnancy.

SUNLIGHT CLINIC.—To this clinic, which is held twice weekly, are referred weakly and debilitated children likely to benefit from ultra violet therapy. During 1957, 34 children made 677 attendances for irradiation. All the children attending this clinic benefited by the treatment they received.

DISTRIBUTION OF WELFARE FOODS

(a) National Welfare Foods Scheme.

The scheme for the distribution of national welfare foods was continue without alteration during 1957.

The following tables give particulars of the work carried out during the year in the distribution of welfare foods.

Table M.C.W.7.

Receipts and issues of welfare foods for the period 2nd January 1957 to 29th December 1957.

	National Dried Milk	Orange Juice	Cod Liver Oil	Vitamin Tablets
1. Stocks received from Ministry of Food (a) In Hand on 2/1/57 (b) Received during the period	3137 52290	5288 81720	702 9504	519 5760
Total	55427	87008	10206	6279
2. Disposal of Stocks: (a) Issued against coupons— (i) paid for by postage stamps (ii) paid for by cash (iii) free (b) Issued at full fee	106 50368 871 1745	490 80722 820	<u>-</u> 9441	<u> </u>
Issues to public (c) Other Issues	53090 762	82032 666	9441 18	5685
Total Issues	53852	82698	9459	5685
3. Returned to Ministry of Food, Damaged, etc	239	147	2	6
4. Stocks in Hand 29/12/57	1336	4163	745	588

The issues of welfare foods from the various distribution centres during the period 2nd January 1957 to 29th December 1957, are shown in Table M.C.W.8. Receipts during this period amounted to £6,664 3s. 1d., made up of £19 17s. $6\frac{1}{2}$ d. in postage stamps and £6,644 5s. $6\frac{1}{2}$ d. in cash.

TABLE M.C.W.8.

Issues of Welfare Foods from the various Distribution Centres 1957

	National		Cod	
Distribution	Dried	Orange	Liver	Vitamin
Centre	Milk	Juice	Oil	Tablets
Windle Pilkington School	41930	55409	6294	3880
Albion Street Clinic	1882	4675	525	356
Blackbrook Clinic	1203	2184	255	111
Elizabeth Street Clinic	1790	4660	596	268
Hardshaw Street Clinic	668	3009	229	399
Haresfinch Clinic	503	2394	278	121
Jersey Street Clinic	792	2110	302	138
Lacey Street Clinic	2380	4639	621	254
Nunn Street Clinic	1942	2952	341	158
GRAND TOTAL	53090	82032	9441	5685

(b) Other Welfare Foods. The issue of proprietary brands of dried milk through the Council's scheme for mothers and infants was limited to special cases for whom the National Dried Milk was not altogether satisfactory. During 1957, approximately 3,358 lbs. of dried milk were distributed through the Council's Scheme.

DENTAL TREATMENT.—Report by Senior Dental Surgeon on the dental treatment provided for expectant and nursing mothers and young children during 1957.

The continued lack of dental staff and the consequent inability to provide an adequate dental service for expectant and nursing mothers caused continued concern throughout the year. In an effort to overcome this lack in some measure a weekly evening session was inaugurated to replace the Friday afternoon session which hitherto had been devoted to the inspection and general treatment of expectant mothers and pre-school children. The change has proved successful in that no difficulty has been experienced in arranging evening appointments and, as a result, an extra session has, during the day, been made available for the treatment of school children.

During the year mothers made 663 attendances and pre-school children 141 attendances. In addition to the 117 mothers made dentally fit, 24 mothers have completed the extraction of their teeth and are awaiting artificial dentures.

Table M.C.W.9.

(a) Numbers provided with Dental Care.

	Examined	Needing treatment	Treated	Made dentally fit
Expectant and Nursing Mothers	210	201	180	117
Children under five	85	82	71	67

(b) Forms of Dental Treatment Provided:

	Scalings & Gum Treat-	Fillings	Silver Nitrate Treat-	Crowns	Extrac-	General Anaes-	Upper or Dent Prov	ures	- Radio-	
	ment		ment			thetics	Full	Partial	graphs	
Expectant and Nursing Mothers	45	39			739	123	61	31	1	
Children under 5		9			135	64			_	

MINOR AILMENTS.—During 1957, 10 children were referred to and received treatment at one or other of the Council's Minor Ailments Clinics.

CRIPPLED CHILDREN.—Crippling defects in children under 5 years of age are dealt with under the Council's Orthopaedic Scheme, which provides periodic supervision by the Consultant Orthopaedic Surgeon and the Physiotherapist.

During 1957, 147 infant welfare cases were dealt with at the Orthopaedic Clinic.

DAY NURSERY.—This nursery is open from 6.30 a.m. to 7 p.m. Monday to Friday, and 6.30 a.m. to 1 p.m. on Saturday. Accommodation is limited to children whose mothers are working, and vacancies are allocated in the first place to essential priority groups, consisting of unmarried mothers, widows compelled to go to work, wives of chronically sick husbands and wives separated from husbands or divorced. Any vacancies remaining following placings from the essential priority list are then allocated to wives under hardship owing to temporary illness of the wage earner, women in nursing or domestic employment in local hospitals and women in certain essential services such as public transport.

The health of the children was good on the whole. There were 6 cases of Tonsillitis and 10 cases of Mumps during the year.

The following scale of charges was operated during the year.

- 5/- per child per day, where both parents working.
- 2/6 per child per day for single mothers.
- 3/6 per child per day in all other cases.

Particulars of attendances &c. at the Hall Street Day Nursery during 1957 are shown below:—

No. of appr at Day	oved places Nursery	No. of child register at t ye	he end of the	Average daily attendance during the year			
0-2 years	2-5 years	0-2 years	2-5 years	0-2 years	2-5 years		
14	16	12	21	8.1	17.1		

THE CARE OF PREMATURE INFANTS.—Since 1944 special efforts have been directed towards preserving life in premature and/or immature infants. The birth weight is stated on every notification of birth form, and in those cases born at home where the birth weight was 5 lbs. 8 ozs. or less

a special visit was immediately made by the Supervisor of Midwives, and, if necessary, arrangements made for admission to hospital. For infants remaining at home, special basket cots fitted with special lining, mattress and bedding, a Belcroy feeding bottle and hot water bottles are available, and have proved of value.

During 1957, 39 premature and/or immature babies were born at home and a further 129 were born in hospital. Particulars of these cases are given in Table M.C.W.10.

When these infants are discharged from hospital, or when the midwife has ceased to attend to those born at home, the Health Visitor concerned is immediately notified and pays special follow-up visits.

THE CARE OF ILLEGITIMATE CHILDREN.—As in previous years, special consideration was given to the care of the unmarried mother and her child, and arrangements were made for admission of cases to St. Monica's Home, Liverpool, and to other Homes as required. All cases of unmarried expectant mothers coming to the knowledge of the Department through Health Visitors, Municipal Midwives, Moral Welfare Workers and other agencies, are notified to the Medical Officer in charge of Maternity and Child Welfare Services, who, after investigation, decides which cases can be dealt with at home or through local hospitals, and which cases can most suitably be dealt with by periods of residence in suitable Homes. The mother is admitted to the Home about two months before the expected confinement and remains there after confinement until suitable arrangements can be made for the after-care of herself and the child. During 1957, 43 unmarried mothers were assisted under these arrangements.

In the majority of cases it was found that the parents were willing to keep the girl at home during the pregnancy if some arrangements could be made for the confinement.

The following list gives the places of confinement:—

Cowley Hill Maternity Hospit	al			••••			• • • • •	••••	9
Whiston Hospital, Prescot	••••		*****			****	••••	••••	10
Other Hospitals		*****	••••	•••••	•••••	*****	•••••		1
Parents' homes	••••	****		••••	••••				4
Diocesan or other Voluntary	Hom	nes	••••	****	• • • • •	• • • • •	••••	••••	18
Undelivered at 31/12/57	••••		••••		• • • • •	••••	••••	••••	1
					T	`otal	••••	••••	43

Mothers entering Homes are assisted by the Corporation in the payment of their fees. All the unmarried mothers were helped to take out Affiliation Orders.

Every effort was made in all cases to enable the mother to keep the child with her in the parental home, and in many cases these efforts were successful.

Table M.C.W.10.

PREMATURE AND/OR IMMATURE BABIES, 1957.

		,					
	rsing rans- spital re	Sur- vived 28 days					
	Born in Nursing Home and Trans- ferred to Hospital on or before 28th day	Died within 24 hrs of birth			I		
	Born Home ferred on	Total		į į			
	sing rrsed ere	Sur- vived 28 days	İ				
-	Born in Nursing Home and Nursed entirely there	Died within 24 hrs of birth					
	Borr Home	Total					
	ome rred on or day	Sur- vived 28 days	2		8	m	6
	Born at Home and transferred to Hospital on or before 28th day	Died within 24 hrs of birth — —					
	Born and to Ho befor	Total	w	7	4	æ	12
	ome ed Iome	Survived 28 days	garantel .		_	21	24
	Born at Home and Nursed entirely at Home	Died within 24 hrs of birth					-
	Bor an entire	Total	2	-	71	22	27
	pital	Survived 28 days	7	22	22	09	11
	Born in Hospital	Died within 24 hrs of birth	9				7
	Вогл	Total	18	26	22	63	129
	WEIGHT AT BIRTH		3 lb. 4 oz. or less	Over 3 lb. 4 oz. up to and including 4lb. 6 oz.	Over 4 lb. 6 oz. up to and including 4lb. 15oz.	Over 4 lb. 15 oz. up to and including 5lb. 8oz.	Totals

The following is a summary of the disposal of the children born during the year:—

Cared for by grandparents while mother goes to work	• • • • •	9
Cared for by mother	••••	14
Seeking adoption	••••	9
Adopted	****	4
Parents married later	••••	4
In Residential Nursery (c/o Children's Officer)	•••••	1
With Foster Parents (c/o Children's Officer)	••••	1
Tota!		42
1 Otar	****	72

HOSPITAL ACCOMMODATION.—The Cowley Hill Maternity Hospital, administered by the St. Helens and District Hospital Management Committee, is the only Maternity Hospital in St. Helens and has a complement of 50 beds, which includes a 17-bed General Practitioner unit.

Throughout the year patients booked for the Cowley Hill Maternity Hospital at the Council's Ante-Natal Clinics and also at the Ante-Natal Clinics at the Hospital. When accommodation at the Cowley Hill Maternity Hospital is not available, St. Helens patients are referred to Whiston Hospital. Emergency cases are admitted to Cowley Hill Maternity Hospital when beds are available. Patients are booked for hospital confinement when they come into one of the following classes:—

Abnormal obstetrical cases Multiparity Unsuitable home conditions Primigravidae

When a woman is recommended for hospital confinement on social grounds and applies to her district clinic for a hospital bed, a report is requested from the district midwife regarding the suitability of the home for confinement. The health visitor of the district is also asked to report on the general family conditions, the amount of help available, the type of work on which the husband is engaged, and any other relevant matter, so that the medical officer in charge of the hospital bookings may assess the case. When a hospital bed cannot be granted, the midwife or health visitor visits the patient and advises the use of the Home Help Service in appropriate cases, the use of maternity outfits, and on the general working of the Domiciliary Midwifery Service.

During 1957, 1,272 births (983 being St. Helens cases) took place in the Cowley Hill Maternity Hospital, 353 St. Helens births in the Whiston Hospital, Prescot, and 32 St. Helens births occurred in other hospitals.

MATERNITY AND NURSING HOMES.—At the beginning of 1957 there were 2 private Nursing Homes registered in St. Helens with accommodation for 4 maternity cases and 4 medical cases. The number of maternity patients delivered in these Homes was 2 (only 1 being a St. Helens patient). Both of these Nursing Homes closed down during the year.

XI.—MIDWIFERY SERVICE.

MUNICIPAL MIDWIFERY SERVICE.—The staff establishment of the Municipal Midwifery Service is fifteen District Midwives and one Non-Medical Supervisor of Midwives. At the end of the year there was a staff deficiency of two District Midwives. The midwives work from their own homes and are grouped in districts to allow for relief duties. The following table gives a summary of the work done by the staff of the Municipal Midwifery Service during 1957.

Number of cases attended:-

as midwife	•••••	•••••	•••••	•••••	•••••	•••••	•••••	•••••	501
as maternity nurse	•••••	•••••		•••••	•••••	•••••	•••••	•••••	85
						Tot	al	•••••	586
Number of live births		•••••	••••	•••••	•••••	•••••	•••••	•••••	563
Number of still-births	••••		•••••	•••••	•••••		•••••	•••••	16
Number of abortions	•••••	•••••		•••••				••••	18
Number of cases in wh	ich n	nidw	ife s	ent f	or m	edica	al		
assistance	•••••	•••••	•••••	•••••	•••••	•••••	•••••		166
									(28.3%)
G	•	-4:-							506
Supervisor's visits and	inspe	CUO	ns	•••••	••••	•••••	•••••		596

During the year Gas and Air Analgesia was given to 446 patients, a percentage of 82.9 of the total number of live and still-births. All the domiciliary midwives are qualified to administer Gas and Air Analgesia, and for their use, seven portable sets of Minnitt's Gas and Air Analgesia Apparatus are kept at the Central Ambulance Depot, and are despatched from that depot to the patients' homes by car immediately on request by the Midwives. The use of this analgesia is being urged and encouraged in the service.

Domiciliary midwives are trained in the use of Pethidine during confinement, and they are all issued with this sedative and analgesic drug for use in their practices. During the year this drug was administered to 243 patients. Pethidine in the early stage of labour, and Gas and Air Analgesia have been found most beneficial in helping to alleviate the suffering of childbirth. During 1957 two midwives attended refresher courses.

It is interesting to note an increase in domiciliary confinements as compared with institutional. In past years the trend has been towards mothers entering hospital to have their babies, with a consequent severe strain on available hospital beds which might be necessary for emergency cases or cases requiring admission on priority grounds. The policy of the Health Authority in placing Midwives in new housing areas seems to be bearing fruit. Once the mothers in the new areas feel that they have midwifery services easily available close to their homes, they are content to have their babies there.

MATERNITY CASES ATTENDED BY MIDWIVES.—The following table shows the extent of the work carried out by the various classes of midwives in St. Helens during 1957.

Table M.C.W.11.

Number of Maternity Cases in the Area of the Local Supervising Authority attended by Midwives during 1957.

	As Midwives	As Maternity Nurses
(a) Domiciliary Midwives. Midwives employed by the Authority	501	85
Midwives in Private Practice	-	1
(b) Midwives in Institutions. Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act.	1109	156
Midwives in Private Practice		2

INSPECTION OF MIDWIVES.—During 1957, 34 midwives notified their intention to practise within the Borough. At the end of the year, 28 of these midwives were still practising within the Borough, and of these 2 were in private practice, 10 were employed by the Local Health Authority, and 16 were engaged at the Cowley Hill Maternity Hospital.

The supervision and inspection of midwives is carried out by Medical Officers and by the Non-Medical Supervisor of Midwives. During 1957, 3 visits for inspection and supervision were paid to private midwives and 127 visits to the Council's midwives.

XII.—HEALTH VISITING.

The duties of the Health Visitors include the general health welfare of the family as a whole, as well as the specialised duties connected with the School Medical Services and the Care of Mothers and Young Children. This means that time is given to home visiting in connection with the welfare of old people, the follow-up of patients discharged home from hospital, enquiries regarding home conditions of mothers requesting confinement in hospital, in addition to the routine and special visits required to be paid to mothers and young children under school age, and home visits directly connected with School Medical Inspections. The Health Visitors also staff the various Ante-Natal Clinics and Child Welfare Clinics in the Borough, and are in attendance at the School Medical Inspections.

Once again there was a continued shortage of health visitors throughout the year. Out of an establishment of 19 health visitors, the staff at the beginning of 1957 totalled 12 health visitors, including 3 engaged on a part-time basis. During the year there was one resignation but four students were trained and taken on the permanent staff, so that at the end of the year there were 15 health visitors (including three part-time health visitors). No students were enrolled for training during the year.

Great credit is due to the staff, therefore, for the fact that the total number of district visits paid during the year was 32,291. It is of particular note that the number of visits to expectant and nursing mothers and infants under one year of age reached a very satisfactory level, thus maintaining the basic educational work of the health visitor. The staff shortage also meant that the work on the "vacant" districts had to be shared amongst existing staff, but these duties were accomplished cheerfully and willingly and the department expresses its appreciation for the work so ably performed under difficulties. It should be noted here that the payment of car allowances by the Committee to those Health Visitors using their cars, made it possible to give essential cover to the "vacant" districts which would otherwise have been impracticable.

In an effort to attract more student candidates a recommendation was submitted to the Health Committee that extra financial assistance towards training and examination fees should be given, and also that assistance in travelling and subsistence should be considered during the period when the students have to travel to Liverpool for lecture sessions.

During the year two Health Visitors attended a Refresher Course.

The following statement shows the home visits paid by Health Visitors during the year:

To expectant mothers

(a)	first visits	*****	30000	*****	•••••	*****	*****	*****	403
-----	--------------	-------	-------	-------	-------	-------	-------	-------	-----

(b) subsequent visits 233

To infants under one year		
(a) first visits		1912
(b) subsequent visits	•••••	6587
To children aged one to five years	•••••	17185
To Tuberculous households	*****	491
To other cases	·····•	5480
To	otal .	32291

XIII.—HOME NURSING SERVICE.

During 1957, the Home Nursing Service was carried out by the St. Helens and District Nursing Association acting as agents of the Local Health Authority. This service is now under the direct supervision of the re-organised Committee of the Nursing Association on which is full representation from the Local Health Authority.

The staff establishment is 1 Superintendent, 2 Assistant Superintendents, and 21 District Nurses. The nurses paid 92,578 home nursing visits during the year, and there were 3,325 cases attended to during this period. An analysis of the cases and visits is given below.

Number of cases attended and visits made by Home Nurses during 1957.

- 3				8			
Nature	of Illnes.	S				Cases	Visits
Medical				•••••		2,708	72,673
Surgical	•••••	•••••	• •••••	•••••	•••••	290	6,562
Infectious Diseases				*****	•••••	86	762
Tuberculosis				*****	••••	157	11,099
Maternal Complications				•••••	*****	25	344
Others		•••••		•••••	•••••	59	1,138
		Total	S	•••••	•••••	3,325	92,578
Patients (included in above	ve totals)	who we	ere 65	year	S		
or over	•••••			*****	•••••	1,090	43,290
Children (included in ab					r		
5 years of age	*****	*****	*****	*****	•••••	331	2,697
Patients (included in above	re totals)	who had	d more	e thai	1		
24 visits during the y	ear			*****	*****	791	71,912

A review of the work done during the year showed a very slight decrease generally in the total number of cases attended by domiciliary nurses. This was also reflected in a slightly decreased number of visits to the homes. 3,325 cases were dealt with in 1957, against 3,381 in 1956, and the number of home visits was 92,578 as against 94,062 in the previous year. Out of the reduced number of domiciliary visits paid, there was, however, an increase in the category of cases attended aged 65 years and over, and it should also be noted that there was an increase in the total number of visits paid to the elderly people in this age group. It is satisfactory to note this and to feel assured that many cases being successfully attended at home by the unremittent care of the domiciliary nurses, might otherwise have to be accommodated in hospitals under the provision for the chronic sick.

During the year the staff position was greatly improved, a fact which was appreciated during the greatly increased work occasioned by the influenza epidemic in September/October, 1957, when there was a sudden and greatly increased demand for domiciliary services.

The thanks of the Local Authority should be expressed to the voluntary members of the Committee of the Association who continue to give so much time to Committee work concerned with the running of the Nurses' Home and the welfare and work of the staff. Their help could not be easily replaced and it felt that their services are not only appreciated by the Local Health Authority, but by those members of the community, particularly the aged sick, who benefit so much from the domiciliary nursing service. Once again also, the very excellent work done by the nurses on the staff, especially during times of great demand should be noted and recognised.

XIV.—HOME HELP SERVICE.

The Home Help Service operating in St. Helens provides help in cases of maternity, sickness, convalescence, old age and infirmity, or any emergency in the household due to illness.

At the 31st December, 1957, there were 58 part-time Home Helps working an average twenty-two hour week, i.e. the equivalent of 29 whole-time staff.

During the year the Home Helps attended 369 cases, 146 of whom were new cases and 223 were old cases from previous years. An analysis of the cases dealt with is given below.

Table H.H.1.

		% of			Recovery of Fees		
Cases attended	No.	Total Cases	Full Time	Part Time	Full Fee	Part Fee	
Maternity Cases. Domiciliary Confinements	20	5.5	16	4	8	12	
Ante-natal Cases	5	1.5	1	4	3	2	
Sickness and other Cases. Chronic Illness	59	16		59	12	47	
Acute Illness	23	6	1	22	15	8	
Tuberculosis	10	2.5		10		10	
Mental Illness	1	0.5		1		1	
Old Age and Infirmity	251	68		251	21	230	
Totals	369	100	18	351	5 9	310	

Home help service for the 146 new cases during the year was recommended by the following:

Housing Department					1
Welfare Services		•••••	•••••	•••••	17
Council of Social Service				*****	6
National Assistance Board	*****	*****	*****	*****	11
Health Visitors and Midwives	•••••	*****	*****	•••••	13
District Nursing Association	*****		•••••		1
Hospitals	•••••		*****	*****	6
Personal application, neighbour	s an	d rela	ative	S	62
Private Practitioners	•••••	•••••	*****		26
Society for the Blind	•••••	•••••		*****	2
N.S.P.C.C	*****	•••••		••••	1

The following statement shows the visits paid by the Home Help Organiser during the year:—

Number of primary visits to cases	*****	•••••	•••••	255
Number of return visits to cases	•••••	*****	•••••	1885
Number of visits to Home Helps	•••••	*****		108
				2248
				2.240

The standard fee during the year for Home Help Services, as laid down by the Health Committee, was 3/0d. per hour to 7th July, 1957, and 3/3d. per hour from the 8th July, 1957. Reduction of this fee in part is based on an approved scale.

By arrangement, the collection of fees from users of the service was transferred to the Borough Treasurer's Department during the year. This was done for the purpose of releasing the Home Help Organiser for the more essential work of interviewing and home visits.

Once again the Home Help Service showed during the year a steady expansion and it was necessary to increase the staff to meet this. The greatest demand came from cases of chronic illness, and old age and infirmity, and one can set no limit to the need for help in this type of case in future years. In connection with this, a special report was submitted to the Health Committee on Local Health Services for the chronic sick and infirm, following Ministry of Health Circular 14/57 (see appendix 1). In this report, immediate strengthening of the Home Help Service was recommended followed by further reviews to ascertain any further needs in ensuing years. The vital necessity to the community of the Home Help Service cannot be over-estimated.

XV.—INCIDENCE OF BLIND AND PARTIALLY SIGHTED PERSONS.

Welfare of blind persons in St. Helens is the responsibility of the Welfare Services Committee of the Local Authority. The majority of their activities in this sphere are undertaken on their behalf by the St. Helens and District Society for the Welfare of the Blind.

The Medical Officer of Health is responsible for arrangements for certification for registration.

During 1957, 89 completed forms B.D.8. were received by the Medical Officer of Health. Of these, 42 related to blind persons and 47 to partially sighted persons.

(a) Registered Blind Persons.

On the 1st January, 1957, there were 283 persons registered as blind in St. Helens. During the year 33 new cases were added to the register (including 7 cases formerly classed as partially sighted persons). Three cases were transferred into the Borough from other areas, whilst 28 names were removed from the register due to death or transfer out of the Borough. Thus at the end of 1957 there were 291 registered Blind persons in St. Helens. The following analysis gives the information as at 31st December, 1957, concerning the number of blind persons of both sexes according to age groups.

Age	Distribution	on:						Males	Females	Total
Age	under 1 y	ear					•••••		No-tention N	***
	1-10	•••••	••••		••••			1	_	1
	11-15	*****				*****	*****		galacterism (
	16-20	•••••	*****	****	•••••		** ***	2	3	5
	21-29	*****	•••••	*****	*****		*****	5	7	12
	30-39	*****	•••••	••••				7	8	15
	40-49				*****		•••••	12	13	25
	50-59	•••••	*****		*****		*****	11	9	20
	60-64	*****			*****			14	18	32
	65-69	•••••	•••••	*****	•••••	*****	•••••	16	20	36
	70- 79	*****		*****		*****		31	47	78
	80-84	•••••		•••••				12	29	41
	85-89	*****		••••	•••••	*****		10	12	22
	90-	•••••		•••••			•••••	1	3	4
									grade-station-of-the-played by-station	-
						*		122	169	2 91
									(MERCHANICA AND AND AND AND AND AND AND AND AND AN	

Educational and Occupational distribution.

The following analysis shows the occupational states of the employed registered blind persons.

	A							Males	Females	Total
Education-	-At school Not at sch	ool	*****	*****	*****	*****	*****	1		1
								1		1
	nt—Worksh	ops					Л	L ales	Females	Total
Age	16-20	•••••	•••••	•••••	••••	•••••	•••••	-	1	1
	21-39	•••••	•••••	••••	•••••	•••••	*****	3	2	5
	40-49	•••••	•••••	•••••	*****	*****	•••••	6	1	7
	50-59	*****	•••••	•••••	*****	•••••		3	2	5
	60-64	•••••	•••••	• • • • • •	•••••	•••••		2	transmitted.	2
	65 & over					•••••		1		1
								15	6	21
Employmer	nt—Elsewhe	re								
	e 16-20							1	1	2
5	21-39		•••••	*****	*****		•••••	$\hat{2}$	Î	2 3
	40-49	•••••	*****	•••••	*****	*****	*****	1		1
	50-59	•••••	•••••	•…•		•••••		3	-	3
	60-64	• · · · · •	*****	•••••	•••••	•••••	•••••	1		1
	00-0-	*****	•••••	•••••	•••••	*****	•••••	1		1
							ge. And	8	2	10
							-			

Thus 31 were employed during the year (23 males and 8 females).

The following table indicates the different types of occupation of the 31 registered blind employed persons noted above:

Occupation	Pla	ployment	Totals	
Occupation	Work- shops	Home	Elsewhere	Totals
Salesmen	1			1
Basket Workers	8	-	_	8
Brush Makers	5	_	_	5
Machine Knitters	4	-		4
Labourers	_	-	4	4
Mat Makers	1	-	1	2
Chair Seaters	1	_	_	1
Telephone Operators	_	-	1	- 1
Cleaners	1		_	1
Factory Operatives			2	2
Typists		_	2	2
Totals	21		10	31

The following table indicates the position of the remaining 259 unemployed registered blind persons with respect to training and capability for employment.

Classification	Males	Females	Total
Under Training Trained but Unemployed Not Available for Work Not Capable of Work	2	1 29 20	1 3 33 41
Not Working (all over 65 years of age) Unemployed but capable of and available for work	69	111	180 1
Totals	98	161	259

Forty-three of the persons registered as blind also suffered additional disabilities as indicated in the table below:

							Males	Females	Totals
Mentally Disordered		•••••		•••••		•••••	1	1	2
Mentally Defective	•••••						2	alermented	2
Physically Defective	•••••	•••••			•••••	•••••	4	5	.9
Deaf without Speech	•••••				*****	•••••	1		1
Deaf with Speech		•••••		•••••	•••••	•••••	2	3	5
Hard of Hearing			•••••		•••••	• • • • •	13	7	20
Physically Defective an									
Partially Deaf	•••••	•••••	*****	•••••	*****		1	3	4
						-		4.0	
		Tota	.ls	••••			24	19	43

Two youths attend the St. Helens Occupational Centre for Mental Defectives.

Thirteen persons are maintained in homes, 2 in mental hospitals, 2 in mental deficiency institutions and 3 in other hospitals.

(B) Registered Partially Sighted Persons

During the year 47 completed B.D.8. forms were received by the Medical Officer of Health in respect of partially sighted persons.

On the 1st January, 1957, there were 63 persons registered as partially sighted. Twenty-one new cases were admitted to the register during the year whilst 12 names were removed from the register for the following reasons: death 4, transfer out of area 1, transfer to register of blindness 7. Thus at the 31st December, 1957, there were 72 persons registered as partially sighted within the Borough. The following analysis gives the information concerning these persons by age groups:—

Age distribu Age	5-15 16-20 21-49 50-64	 •••••					Males 4 4 3 3 14	Females 3 4 9 28	Total 7 4 7 12 42
	os and over	*****	•••••	•••••	*****	•••••	28	44	$-\frac{42}{72}$

Educational and Occupational Distribution.

The following analysis shows the different states of occupation of the 72 partially sighted persons:

رم)	D		,	Am	Males	Females	Totals
(a)	Persons over 16 years of ag (i) Available for work	e		•••••	1	1	2
	(ii) Not available for or no (iii) Employed	ot capable	of w	ork	22	39 1	61
	(III) Employed		*****				
		Totals	•••••		24	41	65
(b)	Persons under 16 years of a	age—					
	Attending Special Schools			•••••		2	2
	Attending other Schools Ineducable			•••••	3	1	4
		Totals	*****		4	3	7

Particulars of Cases Examined.

The following table shows the analysis of completed forms B.D.8 received by the Medical Officer of Health during 1957 in respect of Blind and Partially Sighted Persons.

(i) Number of cases registered or re-examined		Cause of Disability							
during the year in respect of which para. 7(c) of	Cata	Cataract Glau				lental plasia	Oth	ers	
Forms B.D.8 recommends:	M	F	M	F	M	F	M	F	
BLIND (a) No treatment	10	14		2			5	6	
(b) Treatment (medical, surgical or optical)	3	2						_	
PARTIALLY SIGHTED (a) No treatment	8	15		2			4	7	
(b) Treatment (medical, surgical or optical)	1	3		1		_	2	4	
(ii) Number of cases under (i) above which on follow-up action have received treatment: (a) Blind cases	-								
(b) Partially sighted cases	1	4		1		-	2	4	

Registered Blind Persons

As was the case in 1956, cataract again proved to be the commonest condition responsible for blindness amongst the 33 newly registered cases in 1957.

Ophthalmia Neonatorum.

There was 1 case of ophthalmia neonatorum notified to the Medical Officer of Health during the year 1957.

Acknowledgement is made to Mr. M. F. Beglin, Chief Welfare Officer, for the information contained in the above Section.

XVI.—GENERAL PROVISION BY THE HEALTH AND WELFARE SERVICES FOR THE CARE OF HANDICAPPED PERSONS INCLUDING EPILEPTIC AND SPASTIC PERSONS

The welfare provision for the care of handicapped persons, including Epileptics and Spastics, is undertaken by the Welfare Services Committee of the Council in accordance with the scheme approved by the Ministry of Health on 24th May, 1954.

At the end of 1956, 261 persons, substantially and permanently handicapped, had been registered. During 1957, a further 20 registrations were effected and 6 persons were removed from the register due to death. Thus on the 31st December, 1957, 275 persons substantially and permanently handicapped were on the Register.

The main source of notification has been from persons responding to a circular issued on behalf of the Welfare Services Committee by the Disablement Resettlement Officer of the Ministry of Labour and National Service. This circular was initially sent to all cases coming within Section 2 of the Disabled Persons Employment Act, 1944, and to other unemployed registered disabled persons. The circular was sent at the time when the disabled persons registration under the Employment Act was due to be renewed.

At the end of 1957, registration of these categories of cases had virtually been completed and arrangements were initiated for persons in employment to be advised of the registration facilities. During 1958 it is expected that the number of persons registering will greatly increase but that the basic need in these cases, i.e. for gainful occupation, will already have been met. Registration is purely voluntary but the response so far has been very encouraging.

Having assessed the needs of the 275 registered persons, it was obvious that almost in every case the prime need was for gainful occupation and with the co-operation of the Disablement Resettlement Officer of the Ministry of Labour and National Service and the Youth Employment Officer, certain cases were recommended for employment or training. The greatest remaining need appeared to be for a Social Centre and accordingly such a Centre was opened on the 18th March, 1957, at the Congregational Hall, Ormskirk Street, St. Helens. Classes are held weekly on Monday afternoons when the handicapped persons attending are taught handicrafts suitable for their particular forms of disability. Arrangements are also provided for those who do not wish to participate in handicraft work and various games are available for their use.

Thirty persons attended the Social Centre on the opening day and commenced work with much enthusiasm. Transport is provided for eight persons who otherwise could not attend the Centre. The handicrafts at present practised are:—

Basketry, Crinothene Modelling, Dualso Basketry, Dress Making, Embroidery, Felt Toy Making, Imitation Jewellery, Knitting, Leather Work, Lamp Shade Making, Linen Embroidery, Marquetry Pictures, Model Craft Assembly, Painting (Water Colours), Plaster Cast Moulding, Parchment Lamp Shade Making, Paper Flower Assembly, Raffia Work, Rug Making, Straw Plaiting, Seagrass Stool Assembly, Stamencraft.

The Central Council for the Care of Cripples arranged for the Geoffrey Peto Travelling Exhibition of Aids for the Disabled to visit St. Helens, and the Welfare Services Committee staged this exhibition in conjunction with a display of handicrafts completed by Disabled Persons attending the Council's Social Centre together with a display of goods produced at the St. Helens and District Society Workshops for the Blind.

Two Welfare Visitors have been appointed to the staff of the Department to undertake the regular visiting of handicapped persons in addition to other duties concerned with the care of aged persons living in their own homes. During the year, 203 visits were made to handicapped persons living at home and seven such persons received regular weekly handicraft instruction.

HANDICAPPED PERSONS

(a) Classification in relation to defect

Details of the numbers and classification of known handicapped persons in St. Helens are given below. These are classified under the appropriate Medical Research Council code and the figures shown in parenthesis denote the numbers who suffer from dual disabilities, e.g. deaf and partially sighted, blind and epileptic, etc.

Table H.P.1.

Details of registered handicapped persons in St. Helens classified in accordance with disability.

ciassified in accordance	VVICAL	disability.	,	
DISABILITY	Code	Male	Female	Total
Amputation	A/E	7	3	10
Arthritis and Rheumatism	F	16(4)	7(2)	23
Congenital Malformations and Deformities	G	9(1)	2	11
Diseases of the Digestive and Genito-Urinary Systems; of the Heart or Circulatory System; of the Respiratory System (other than T.B.); and of the skin	H/L	57(8)	7	64
Injuries of the head, face, neck, thorax, abdomen, pelvis or trunk. Also injuries or diseases (other than T.B.) of the upper and lower limbs and of the spine	Q/T	35(3)	13	48
Organic Nervous Diseases— Epilepsy, Disseminated Sclerosis, Poliomyelitis, Hemiplegia, Sciatica, etc	V	40(3)	18	58
Neuroses, Psychoses and other Nervous and Mental Disorders not included in V	U/W	20(1)	6	26
Tuberculosis (Respiratory)	X	13(1)	3(1)	16
Tuberculosis (Non-Respiratory)	Y	1	1	2
Diseases and Injuries not specified above	Z	10	7	17
Totals		208(21)	67(3)	275

(b) Grouping in relation to employability

The following table, H.P.2., shows the grouping of the 275 handicapped persons in relation to their employability. These are classified by sex in the five recognised employability groups.

Six adaptions to dwelling houses have been carried out at a total cost of £198 18s. 6d. to enable handicapped persons to live normal lives in their own surroundings. Ramps have been provided to replace steps for persons using wheelchairs, and kitchen appliances have been moved to provide a more satisfactory lay-out within the home for a disabled person.

Table H.P.2.

Details of registered Handicapped Persons in St. Helens grouped in accordance with employability.

Age Group	Employability Group	Code	Male	Female	Total
Persons aged 16 & upwards	Capable of work under ordinary industrial conditions	A	114	20	134
	Incapable of work under ordinary industrial conditions but mobile and capable of work in sheltered workshops	В	64	20	84
	Incapable of work under ordinary industrial conditions and insufficiently mobile for work in sheltered workshops but capable of work at home	С	5	6	11
	Incapable of or not available for work	D	23	20	43
Children under the age of 16 years	Whose needs are likely to be met under other enactments but for whom the L.A. have a general responsibility under S.29 of the National Assistance Act, 1948	E	2	1	3
		Totals	208	67 .	275

The Table H.P.3 (page 78), shows the demands made by 163 of the 275 registered handicapped persons for the various services available under this scheme. Many of the 163 persons wish to participate in more than one service. The remaining 112 cases have requested assistance in the obtaining of employment, and of benefits other than those provided by the local Welfare Authority.

Three adaptations to premises have been carried out at an approximate cost of £52, to enable persons to live normal lives in their own surroundings.

During the year, wheelchairs were loaned to two handicapped persons to enable them to visit relatives.

Table H.P.3.

Adaptation to Premi	ses	•••••		••••	*****	3
Handicrafts—						
(a) In the Home	2	•••••	*****	•••••		7
(b) Collective		•••••	•••••	•••••	*****	76
Need for Holidays	•••••		•••••	•••••		5
Social Visits			•••••	•••••	*****	57
Manual Assistance	*****					10
Social Centre				•••••	•••••	142
Recreation and Ente	rtain	men	ts			35
Transport facilities			*****		••••	8
	Т	otal		•••••		343

It was possible to provide accommodation for one handicapped person to enable his wife and children to take a holiday. One epileptic in a Colony administered by a voluntary organisation, was admitted to an Old Persons' Hostel for a holiday period.

Epileptics

There were 31 known cases of epilepsy in the Borough over the age of 15 years. Of these 24 were males and 7 females.

Table H.P.4.

Number of registered Epileptics under Classification V. of Table H.P. 1.

	Employed	Un- Employed	Total
Males Females	5 (1)	19 (4) 6	24 (5)
Total	6	25	31

Epileptics of school age are not registered with the Welfare Department, but at the close of school life recommendations are made to that department, after assessment of individual cases, with regard to the possibilities of placing in employment.

During the year 6 epileptics were provided by the Welfare Authority with accommodation in Epileptic Colonies. Of these, 1 male and 3 females were in colonies administered by voluntary organisations and 2 males in a colony administered by another Local Welfare Authority.

CO-ORDINATION OF THE WELFARE OF AGED PERSONS

The scheme for the care of aged persons living within the Borough which was commenced in 1954, has proceeded quite satisfactorily during 1957. At the time of the inception of the scheme, it was realised that there were 11,672 persons of pensionable age living within the Borough (R.G. Census 1951). To extend the service to cover the whole of this class of persons would have been unnecessary and uneconomic and a start was, therefore, made on registering those persons living alone or otherwise in need of care. On 31st December, 1957, the Department was supervising the care of 558 elderly persons. One hundred and nineteen of these persons were provided with residential care, 199 were being visited by the Home Teachers for the Blind, 86 by the Chaplain for the Deaf, 5 by Voluntary Visitors and the remaining 149 by Welfare Visitors of the Department. It is felt that there must be many more people who could benefit through the scheme, and renewed publicity is to be effected in 1958 when the Launderette Service for elderly persons is commenced. During the year Voluntary Visitors paid 116 visits to the five persons expressing a wish to be so visited, and Welfare Visitors of the Department paid 1,433 visits to the remaining 149 registered cases. Thirty-six deaths of registered persons took place during the year, and on the 31st December, 1957, 558 persons were still registered.

The need for hot meals to be delivered to housebound persons increased during the year and it was found necessary to prepare 4,474 main meals at the Council's Hostels for distribution to aged persons living at home. The distribution was undertaken by ladies of the Women's Voluntary Services, and the Rotary Club of St. Helens undertook to provide transport for one half of this number, the remaining transport being grant aided by the Welfare Committee. Deliveries are made on Wednesdays and Thursdays in each week, with a special Christmas Day delivery of traditional fare. Arrangements have been completed for the extension of the service to cover Tuesdays in 1958. The cost per meal to the recipient was maintained at 1/-d.

Nine of the persons registered under the scheme became too infirm to continue to reside alone and four were admitted to residential accommodation provided under the National Assistance Act, and five entered Voluntary Homes managed by a religious organisation. It was also possible to provide short stay care at the Council's residential hostels for five aged persons whilst the relatives with whom they normally resided entered hospital for treatment, or took a well-earned holiday and returned to resume the care of these persons.

Three wheelchairs were purchased by the Welfare Committee during 1957 and were loaned for varying periods to 6 normally housebound elderly persons so that relatives and friends could take them out of doors in suitable weather.

Excellent co-operation was forthcoming from all the voluntary and statutory bodies in the area and special tribute must be paid to the General Practitioners who have gladly advised and sought the assistance of the Department when their patients' welfare so needed. The Hospital Authorities have also co-operated to the fullest, in accepting social reports on persons awaiting admission to chronic sick accommodation, advising the pending discharge of persons who were to return to a house where they were to live alone and in accepting for transfer to chronic sick hospitals, residents in Part III National Assistance Act Accommodation, whose conditions deteriorated.

Problems in connection with the following were also ascertained and were dealt with by reference to an appropriate source:—

Service of General Practitioner	••••	*****	12
Spiritual help from Clergy	•••••	*****	5
Chiropody treatment		•••••	3
Optical treatment	•••••		1
National Assistance benefit	•••••	•••••	9
W.V.S. clothing	•••••	•••••	24
Christmas food parcels			45
Christmas dinners			50
Assistance of Home Teachers		•••••	2
Assistance of Home Help Service			19
Assistance of Public Health Inspectors			6
Assistance of Housing Welfare Officers	•••••		7
Assistance of Duly Authorised Officers			5
Assistance of Health Visitors	•••••		7
Assistance of District Nurses Association		•••••	2
Renewed contact with relatives			7
Requiring sub-tenants to reside with them and	prov	ide	
continuous care	•••••	•••••	6
Coal Merchants	•••••	•••••	1
Insurance Societies	*****	•••••	1
Provision of fireguards	•••••	•••••	1
Collection of Pensions	•••••		9
North Western Gas Board			3
Ministry of Pensions & National Insurance		•••••	7
R.S.P.C.A. concerning the domestic pets of aged per	sons	•••••	2
Social visits to registered aged persons in hospital	••••	*****	39
Free issue of tickets for theatre entertainment			20
Return of pre-paid cards			34

Each of the 149 persons registering was supplied, at the time of the initial visit, with a pre-paid postcard in order to summon assistance should help be needed before the next normal visit became due. Thirty-four of the persons registering returned these cards during the year seeking assistance, which was made immediately available. The protection of moveable property of elderly persons admitted to hospital, was undertaken where no suitable arrangement had otherwise been made by the patient. Where the property remained in the house and the tenancy could be safe-guarded, arrangements were made to insure the contents and the Chief Constable kindly arranged police supervision of the premises. Where the tenancy could not be protected, all moveable property was transferred to storage in accommodation belonging to the Welfare Services Committee. On the death of an elderly person where no satisfactory arrangements had otherwise been made, the Welfare Services Committee undertook to arrange the burial and to maintain contact with the Duchy of Lancaster concerning the administration of the estate.

It is appreciated that the number of persons registering represents only a small fraction of the total elderly population of the Borough but the degree of co-operation achieved in this first year of operation has confirmed the necessity for the scheme. It is hoped that the initial success experienced will lead to a greater increase in the numbers registering.

Acknowledgement is made to Mr. M. F. Beglin, Chief Welfare Officer, for the information contained in the above section.

CARCASES INSPECTED DURING 1957.

Table S.I.1

XVII.—INSPECTION AND SUPERVISION OF FOOD

Meat and Other Foods. The inspection and supervision of all meat at the Public Abattoir and at the private slaughterhouse is carried out by qualified meat inspectors.

		Id	TTAGA DIIG	om		Private
			FUBLIC ABAITUIK	OIK		Slaugnter- house
exclud	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs	Pigs
Number killed 1	1872	5019	94	5833	6314	4832
Number inspected 1	1872	5019	94	5833	6314	4832
Condemned:— (a) All diseases except Tuberculosis and Cysticeroi—						
(i) Whole carcases condemned (ii) Carcases of which some part or		2	house	-	3	∞
organ was condemned	242	1243	1	1127	2361	1871
affected with disease other than tuberculosis	12.9%	24.8%	1.0%	19.3%	37.4%	38.9%
(i) Carcases of which come nort or	4	20			1	1
organ was condemned	221	824		1	68	52
spected affected with tuberculosis	12.0%	16.8%	1	Î	1.4%	1.1%
Cysticercocis:— Carcases of which some part or organ was condemned	1	W	1	1	Pr au au	· primary
Carcases submitted to treatment by refrigeration	1			Ī		
Generalised and totally condemned)	1			

The practice was continued during the year of submitting to the Liverpool City Laboratories for examination specimens of parts of carcases or organs suspected to be affected with Cysticercus Bovis. 3 specimens were sent and in all cases the presence of Cysticercus Bovis was confirmed Table S.I.1 gives details of the results of such inspection.

Under the Slaughter of Animals Act, 1933, 3 licences were granted and 32 licences were renewed to slaughtermen during the year.

At the end of the year, 177 premises were registered under Section 127 of the St. Helens Corporation Act, 1933, for the preparation or manufacture of potted, pressed, pickled or preserved meat, fish, or other food intended for the purpose of sale.

During 1957, 2,240 visits were made by Inspectors to shops, stalls and other places where food is prepared or stored.

Public Health (Meat) Regulations, 1924.—No infringement of these Regulations was found during the year.

Merchandise Marks Act, 1926 and Orders.—Infringements of the Merchandise Marks Orders were dealt with by verbal warnings.

Food Hawkers.—Section 47 of the St. Helens Corporation (Electricity and General Powers) Act, 1948, requires the registration of any person (other than a person keeping open shop) who sells, offers or exposes for sale food from any vehicle or receptacle. The section also requires the registration of storage accommodation for any food intended for any of these purposes.

At the end of the year 45 persons and 72 separate sets of premises were registered under this section.

Clean Food Campaign.—Owing to shortage of Public Health Inspectorial staff, activities in connection with the Clean Food campaign had to be seriously curtailed. Despite this, however, some improvement in the hygienic handling and distribution of foodstuffs can be recorded.

It was not found necessary during 1957 to institute legal proceedings under the Food Byelaws.

Food traders in the Borough are generally making a serious endeavour to comply with the requirements of the Byelaws.

The following are the particulars at the end of the year of the numbers and types of food premises in the Borough:—

Grocers' and General Sh	ops	****	*****	*****	•••••	498
Butchers' Shops		*****	•••••		•••••	99
Greengrocery and Wet F	Fish Shops	S	*****		••••	102
Fried Fish Shops				*****	*****	101
Bakehouses	••••	•••••	*****	*****	•••••	58
	*****	*****	*****	*****	*****	
Confectioners' Shops	•••••	•••••	•••••	*****	•••••	59
Sweet Shops	*****	*****	*****	*****	••••	93
Snack Bars, Cafes, etc.	*****	*****	*****	*****	•••••	21
Industrial Canteens						33
_		*****	*****	*****	*****	
Hawkers' storage premis	ses	*****	*****	*****	*****	72
Dairies	*****	*****	*****	•••••	•••••	21
Ice Cream premises	*****	****	*****	*****	*****	4
Miscellaneous food pren	nicec					51
wiscenaneous rood pren	11505	*****	*****	*****	*****	31

Premises registered under Local Acts.

The following are the particulars of food premises in the Borough registered under local Acts together with the numbers of inspections made in respect of each of these classes of premises:—

		67	No. of Inspections
(a)	St. Helens Corporation Act, 1933—Section 127—Premises used for the preparation or manufacture of potted, pressed, pickled or preserved meat, fish or other foods	177	372
(b)	St. Helens Corporation Act, 1933—Section 133—		
	(1) Premises used for the manufacture and sale of ice cream (2) Premises used for the sale of ice cream	⁴ ₃₁₁ }	266
(c)	St. Helens Corporation (Electricity and General Powers) Act, 1948—Section 47. Premises used by hawkers of food as storage accommodation	72	5
Premi	ses registered under Milk and Dairies Regulations	, 1949.	
	Premises used as dairies	21	72

Disposal of Condemned Food.

Condemned meat and offals from the Public Abattoir are disposed of to a firm of animal foodstuffs and fertilisers manufacturers. This firm has given a guarantee that no raw meat will be sold to pet shops and that adequate steps will be taken for preventing the meat from getting into unauthorised hands. All condemned meat and offals are treated with a suitable colouring; agent before release from the Public Abattoir.

Other classes of condemned foodstuffs are dealt with by treatment: with disinfectant for the purpose of rendering them unmarketable, and are afterwards buried at the local refuse tip. Canned goods are punctured before release and are similarly disposed of.

The following are the total quantities of various classes of foodstuffs; which were condemned during the year at the abattoir, or in shops, etc., owing; to being diseased or unsound:

Meat	*****	•••••	*****	*****	*****	*****	177,227 11	bs.
Canned Go	oods	*****	*****	•••••	*****	•••••	18,180 11	bs.
Fish	*****	*****	*****	*****	•••••	*****	650 11	bs.
				*****	*****	*****	150 11	
Miscellane	ous Fo	odstuffs	*****	*****	•••••	*****	426 11	bs.
							40660011	
							196,633 1	bs.

Food Hygiene Regulations, 1955.

The Food Hygiene Regulations, 1955, came into operation at the beginning of 1956.

A survey of all food premises in the Borough has continued throughoutt 1957 with the object of acquainting shop proprietors with the requirements off the Regulations applicable to their premises.

MILK AND MILK PRODUCTS

Milk and Dairies	Regulations,	1949
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At the end of the year there were registered under these Regulations:

- 24 persons as distributors of milk from dairy premises;
- 276 persons as distributors of milk in sealed bottles only from shops; and
 - 21 premises as dairies.

Most of the milk received into dairy premises in St. Helens is delivered to those premises in sealed bottles. The administration of these Regulations does not now, therefore, constitute a serious problem.

565 visits were paid by the Public Health Inspectors to these premises during the year.

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

The following licences were granted during the year under these Regulations:—

Dealers' Licences authorising the use of the special designation "STERILISED" 312 Dealers' Licences authorising the use of the special designation "PASTEURISED" Dealers' Licences authorising the use of the special designation "TUBERCULIN TESTED MILK (PASTEURISED)" 85 Dealer's (Pasteuriser's) Licence authorising the use of the special designation "PASTEURISED" ••••• 1 Supplementary Licences authorising the use of the special designation "STERILISED" 6 Supplementary Licences authorising the use of the special designation "PASTEURISED" 7 Supplementary Licences authorising the use of the special designation

Milk (Special Designation) (Raw Milk) Regulations, 1949

The following licence was granted under these Regulations for the year ended 31st December, 1957:

"TUBERCULIN TESTED MILK (PASTEURISED)"

Supplementary Licence authorising the use of the special designation "TUBERCULIN TESTED (FARM BOTTLED)" 1

Biological Examination of Milk.—In the routine examination of milk supplies 81 samples were examined by guinea-pig inoculation for the presence of tubercle bacilli. All were reported negative.

Bacteriological Examination of Milk.—In addition to the samples of milk taken for examination for tubercle bacilli, 70 samples were also taken for the methylene blue $(4\frac{1}{2}/5\frac{1}{2} \text{ hours})$ reduction test.

The results of these examinations showed that 15 samples of tuberculin tested milk failed to satisfy the methylene blue test required by the Regulations.

194 samples of pasteurised milk were also examined for the methylene blue (30 minutes) test. 1 sample failed to satisfy the test.

Examination of Milk for the presence of Phosphatase.—207 samples of milk were also examined during the year for the presence of phosphatase. Two samples were reported to have been insufficiently heat treated.

Turbidity Test for Sterilised Milk.—During the year 66 samples were submitted for this test. All were reported to be satisfactory.

Milk-in-Schools Scheme.—All milk now supplied to schools under the Milk-in-Schools Scheme is milk for which a pasteuriser's licence has been granted. Careful supervision is exercised by the Public Health Inspectors and frequent samples are taken for chemical examination and for examination for bacterial contamination.

The number of samples taken during 1957 and the results are as follows:

1.	Samples taken for chemical analysis	178
	Number reported below standard	nil
2.	Samples examined for bacteriological cleanliness Number reported to be unsatisfactory	7 nil
3.	Samples examined for the presence of tubercle bacilli Number in which tubercle bacilli was found	7 nil

The chemical analyses of the above samples were carried out by means of the Gerber Test at the Department's own laboratory, and only in doubtful cases were samples examined by the Public Analyst.

Ice Cream Premises.—The following are the particulars at the end of the year of registrations under the St. Helens Corporation Act, 1933, of manufacturers and vendors of ice cream and the premises used by them:—

Manufacturers and Vendors	•••••	•••••	•••••			4
Vendors only	•••••				*****	284
Premises for manufacture and sale	*****	•••••	•••••	•••••	*****	4
Premises for sale only			*****	•••••	•••••	311

The 284 vendors mentioned above sell ice cream in wrapped packages only.

130 samples of ice cream were taken during the year for bacteriological examination by the Methylene Blue Test. These samples were taken from manufacturers and vendors whose premises are situate both inside and outside the Borough.

Results of Ice Cream Sampling

	Grade 1	Grade 2	Grade 3	Grade 4
Producers outside the Borough	51 60	11 2	2 4	
	111	13	6	

213 samples of Lolly Ices were taken during the year for bacteriological examination and were reported to be satisfactory.

All ice cream manufacturers' premises and plants have now been brought up to a satisfactory hygienic standard. Further, all vehicles used for the sale of unwrapped ice cream are provided with satisfactory supplies of hot and cold water and suitable washing facilities.

Very few contraventions of the Ice Cream (Heat Treatment, etc.) Regulations, 1947 to 1952, were found during the year. Manufacturers and vendors are generally making a serious effort to comply with the requirements of these Regulations.

During the year, 266 visits of inspection were made to ice cream premises in St. Helens.

FOOD AND DRUGS.

Food and Drugs Act, 1955.—During 1957, 203 formal samples and 129 informal samples of various foods and drugs were submitted to the Public Analyst, and 10 (4.8%) were reported as adulterated.

Legal proceedings were pending at the end of the year in respect of two formal samples of mincemeat.

In the case of an informal sample of flour reported to be contaminated with mouse excrement the manufacturers were warned by the Public Health Committee.

In the case of three other formal and four other informal samples reported as adulterated, appropriate action was taken by the Public Health Inspector's Department.

In four cases where foodstuffs were found to contain insects or extraneous matter, warning letters were sent by the Public Health Committee.

The Public Health (Condensed Milk) Regulations, 1923 and 1927. The Public Health (Dried Milk) Regulations, 1923 and 1927.—No infringements of these Regulations were found during the year.

Public Health (Preservatives, etc., in Food) Regulations, 1925-1940.— All samples submitted to the Public Analyst under the Food and Drugs Act, 1938 were also examined for the presence of preservatives.

Fertilisers and Feeding Stuffs Act, 1926.—No samples were taken under the above Act during the year.

Pharmacy and Poisons Act, 1933.—At the end of the year there were 47 persons entered in the Local Authority's list of persons entitled to sell poisons included in Part II of the Poisons List. The number of premises concerned was 65.

61 visits were paid to these premises and no infringements of the Act were found.

Pharmacy and Medicines Act, 1941.—No infringements of this Act were found during the year.

Bakehouses.—There are 58 bakehouses in St. Helens and mechanical power is employed in 49 instances.

Twenty-one visits of inspection to these premises were made during the year.

DISEASES OF ANIMALS ACTS.

Tuberculosis Order, 1938.—No cases under this Order were reported during the year.

Anthrax.—One case of suspected Anthrax was reported during the year, but the disease was not confirmed.

Swine Fever.—5 cases of suspected Swine Fever were reported. In no instance was the disease confirmed.

Foot and Mouth Disease.—3 cases of suspected Foot and Mouth disease were reported during the year. These cases were not confirmed.

Markets, Sales and Lairs Order, 1925.—There is one collecting and grading centre in the Borough, which is situate in Woodlands Road.

XVIII.—SANITARY CIRCUMSTANCES OF THE AREA.

WATER.—The water supply is from deep wells and boreholes in new red sandstone at Eccleston Hill, Whiston, Knowsley, Kirkby and Melling, supplemented by a supply from the Liverpool Corporation Rivington Main, and water from red sandstone above the coal measures at Clock Face and Collins Green. The water from the last-mentioned source is subjected to chlorination and high pressure filtration before distribution.

The water from the deep wells and from Collins Green and Clock Face is hard, the average hardness being 22.6° and 27° respectively, and the hardness of both is reduced to approximately 10.5° by softening processes before distribution. The water from the Liverpool Corporation Rivington Main is soft and is blended with hard water before distribution, so that in its ultimate distribution it also approximates to 10.5°.

The yield of the Eccleston Hill Pumping Station was increased during the year following test pumping operations and also a start was made on the drilling of the boreholes at Melling Pumping Station.

The principal mains extensions carried out during the year totalled 1,810 lineal yards.

The quality of the water has remained satisfactory and the supply to all parts of the Borough is reasonably adequate. The quantity of water available has been sufficient to meet all requirements during the year.

Bacteriological examinations of the water were made at regular intervals at the sources of supply, and at the reservoirs prior to distribution into supply, in all cases after chlorination.

Of the 587 samples taken for bacteriological examination during the year, 575 were classified as Class 1; 7 Class 2; 2 Class 3; and 3 Class 4.

The water supplied has no plumbo-solvent action.

The supply is on the constant system.

All supplies are chlorinated before distribution.

RIVERS AND STREAMS.—The supervision of rivers and streams in St. Helens is carried out by the Mersey River Board.

DRAINAGE AND SEWERAGE.—During the year a new 21-inch diameter sewer was laid from Worsley Brow along Ellamsbridge Road and Waterdale Crescent to Gerards Lane to alleviate flooding in the Waterdale Crescent area. This sewer replaces a 15-inch diameter sewer which had been badly affected by mining subsidence.

Work continued on the reconstruction of the Parr Sewage Disposal Works and the new works were brought into partial operation in November, 1957.

CLOSET ACCOMMODATION.—At the end of the year 142 pail closets and 141 privy middens were in use serving 117 and 210 premises respectively.

PUBLIC CLEANSING.—During 1957 the whole of the house refuse was disposed of by controlled tipping at Kurtz Tip, Jackson Street. The collection area was extended to cover new properties.

An industrial tip was opened at the Old Metallic Brickworks, Sutton Road, intended for the deposit of small amounts of builder's and jobber's debris, etc. It is hoped that indiscriminate dumping of such debris will thereby be stopped.

HOUSE REFUSE ACCOMMODATION.—The scheme for the provision and maintenance of dustbins and the abolition of ashpits is now in operation throughout the Borough.

Staff shortage again seriously curtailed that part of the programme: dealing with the abolition of fixed ashpits. By the end of the year 134 ashpits: serving 246 houses had been demolished or converted under the scheme.

TAYLOR PARK PADDLING POOL.—8 samples were taken of the water in this pool for bacteriological examination. Treatment of the water was carried out at intervals throughout the summer months under the supervision of the Public Health Inspector's Department.

ATMOSPHERIC POLLUTION.—For the measurement of atmospheric pollution in St. Helens the following observation stations are now maintained:—

Claughton Street Clinic Standard Deposit Gauge. Lead Peroxide Instrument. Albion Street Clinic Standard Deposit Gauge. Lead Peroxide Instrument. Eccleston Hill Waterworks Standard Deposit Gauge. Lead Peroxide Instrument. Victoria Park Standard Deposit Gauge. Lead Peroxide Instrument. Peasley Cross Isolation Hospital Lead Peroxide Instrument. Lead Peroxide Instrument. Sutton Manor Sewage Works Public Health Inspector's Office.

No meeting of the St. Helens and District (Atmospheric Pollution)

Joint Consultative Committee was held during the year.

Smoke filter

Hardshaw Street

315 observations were taken of industrial chimneys during the year. In 45 instances black smoke was emitted for more than two minutes during the half-hour period of observation. Representations were made with the firms concerned with a view to the diminution of the nuisance. In a number of instances these representations resulted in improvements to boiler plants. 108 inspections of boilerhouse plants were made during the year.

FACTORIES.—7 defects were reported by H.M. Inspector of Factories during the year. In addition 35 instances of unsuitable or defective sanitary conveniences were also dealt with as a result of sanitary inspections.

A total of 21 visits of inspection were made to factories during 1957.

Table S.I.2. gives particulars of the administrative action taken under the Factories Act, 1937.

Table S.I.2. PART I OF THE ACT.

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

	Number	Number of				
Premises	on Register	Inspections	Written notices	Occupiers prosecuted		
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	32			_		
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	298	21	7	d-mate		
(iii)Other Premises in which Section 7 is enforced by the Local Authority (ex- cluding out-workers' premises)	17	-		Name and American		
TOTAL	347	21	7			

2.— CASES IN WHICH DEFECTS WERE FOUND

(If defects are discovered at the premises on two, three or more separate occasions they are reckoned as two, three, or more "cases").

	Number of cases in which defects were found								
Particulars	Found	Remedied		erred By H.M. Inspector	which prosecutions were instituted				
Want of cleanliness (S.1)		-		_	-				
Overcrowding (S.2)		_	_	•					
Unreasonable temperature (S.3)	Salayadaha			_	_				
Inadequate ventilation (S.4) Ineffective drainage of floors (S.6) Sanitary Conveniences (S.7)		_	_		_				
(a) insufficient	_			_	_				
(b) Unsuitable or defective	35	8		7	G. Allen				
(c) Not separate for sexes	_				-				
Other offences against the Act (not in- cluding offences relating to Outwork)				_	_				
TOTAL	35	8	_	7	-				

PART VIII OF THE ACT OUTWORK

(Sections 110 and 111)

		SECTION 1	10	SECTION 111				
Nature of Work	No. of out-workers in August list required by Sec. 110(1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwhole-some premises	Notices Served	Prosecutions		
Wearing apparel—making, etc	3		000000					
TOTAL	3							

SANITARY INSPECTION OF THE AREA.—The total number of visits made by the Public Health Inspectors was 23,530. The nature of these inspections is shown in Table S.I.3, and Table S.I.4 contains a list of notices served and the results of such notices.

TABLE S.I.3.

Number and nature of inspections during 1957.

(a) N	umber of complaints investigate	d:-										
	1. Housing defects		*****	*****	*****	*****	*****	*****	*****		9	85
	2. Choked and defective dr	ains	*****	*****	*****	*****	*****	*****	804000	0+0040	3	78
	3. Emissions of smoke	• •••••	*****		01000	*****	*****	*****	******	*****	(50
	4. Accumulations of offensi	ve ma	tter	*****	*****	****	*****	90000	****			10
	5. Miscellaneous		*****	******	*****	*****	*****	*****	*****	*****	13	32
<i>a</i> . •		. ~										
(b) In	spections re Sanitation and Foo	_	ply	•								
	Dwellinghouses inspected	******	*****	•••••	*****	*****	*****	*****	******	******	*****	2184
	Common Lodging Houses	*****	*****	*****	*****	*****	*****	*****	*****	*****	+40.094	109
	Houses-Let in Lodgings		******	*****	*****	*****	*****	*****	*****	*****	*****	10
	Tents, Vans and Sheds		*****	*****	*****	******	*****	******	*****	•••••	*****	68
	Common Yards, Back Roads	and I	Passa	iges	*****	*****	*****	******	*****	*****	teenim	188
	Pigstyes	• •••••	raseae	*****	•••••	*****	*****	****	*****		*****	49
	Horse-manure Middensteads	******	*****	*****	*****	*****	*****	*****	*****	******	*****	6
	Places of Public Entertainme	nt	*****	*****	•••••	*****	*****	*****	*****	*****		5 0
	Public Sanitary Convenience	s	*****	*****	*****	*****	*****	94 song	*****	000 000	*****	54
	Schools	4 *****	*****	*****	*****	******	*****	*****	*****		mecons	27
	Ashes Receptacles	* ******	*****	*****	*****	*****	*****	*****	*****		******	20
	Smoke Observations		*****	******	******	*********	******	*****	******	becces	*******	315
	Visits to Boilerhouses		******	*****	******	*****	******	94 0090	000000	*****		108
	Testing drains: By smoke	894598	******	*****	******	000000	******	oo qabaqal	******		****	54
	By water	******	******	*******	*****	*****	******		*****			9
	By coloured	wate	r	*****		*****	******					71
	By breaking			******	******							17
								******			*******	
								Car	ried	forw	ard	3 339

23658

TABLE S.I.3—continued.

Number and nature of inspections during 1957.

b) Inspec	ctions re Sanitation and Food Supply—continued	3339
	Factories Act, 1937:—Factories with mechanical power	21
	Outworkers' Premises	3
	Shops Act, 1950	129
	Fried Fish Shops	51
	Fishmongers' and Greengrocers'	122
	Butchers' Shops	109
	Grocers' and General Shops	599
,	Bakehouses	21
	Canteens	129
	Public Houses, Beer Houses, etc.	1
	Food Preparing and Storing Places	37 2
	Private Slaughterhouse	16
	Dairies	565
	Ice Cream Premises	266
	Samples of milk for bacteriological and biological examination	425
	Samples of Ice Cream	130
	Samples of Ice Lollies	213
	Samples of drinking water for bacteriological examination	9
	Samples of swimming bath water for bacteriological examination	14
	Samples of other foodstuffs and swabs for bacteriological examination	46
	Samples of milk and other foodstuffs for chemical analysis	510
	Diseases of Animals Acts and Orders	33
	Dat Animala Act 1051	14
	Pharmacy and Poisons Act, 1933 Pharmacy and Poisons Act, 1933	61
	Food Hawkers' Storage Accommodation	5
	Prevention of Damage by Pests Act, 1949	4980
	Inspection of dwellinghouses and other premises for vermin infestation	306
	Visits to work in progress	8411
	D. C. Tine and Smallhamba	4
	Hillindanian' and Barbara' Dramina	235
	Atmospheric Pollution Gauges	165
	Visits re Housing—measurement for "Permitted Numbers"	291
	Food Poisoning Enquiries	9
	Housing Repairs and Rents Act, 1954—Inspections re Certificates of Disrepa	
	Housing Act, 1949—Inspections re Improvement Grants	31
	Miscellaneous Visits (interviews, etc.)	1747
	TATIOCCIMITO AND	., .,

Table S.I.4.

Number of defects for which notices were served during 1957, and notices complied with during the year (including outstanding notices from previous year)

Subject of Notices	Pre- liminary notices	Statu- tory notices	Number complied with
Dampness arising from defective roofs, eavesgutters, rainwater pipes and pointing Defective and choked drains, closets, cesspools, etc. Absence of proper sink	1446 373 23 7 6 — 1514 20 72 22 1 2 — 10	851 101 9 3 - 766 2 222	1038 375 9 1 1 873 9 36 2 2
	3496	1754	2355

Referred to other departments:—

To Borough Engineer.							
Choked or defective sewers	••••	••••			• • • • •		75
Choked or defective street gullies		••••	••••	• • • • •		••••	30
Waste of Water			• • • • •	••••	••••	****	133
Dangerous structures		• • • • •	• • • • •	• • • • •		••••	137
Unauthorised erections		• • • • •	• • • • •				1
Maintenance of Dustbins Scheme			•••••	*****	*****	•••••	20
Defective Paving	•••••						5
To Housing Manager							
Choked drains and housing defects							63
Cases of overcrowding	••••	••••	• • • • •	****			4
Parks & Cemetery Manager Choked drain				•••••		•••••	1
Director of Education Defects	*****		•••••	•••••	•••••	•••••	5
To North Western Gas Board							
Escapes of coal gas							2

CHOKED DRAINS.—During the year 660 complaints of choked drains were made to the Department. Of this number 271 drains were freed from obstruction by members of the staff of the Public Health Inspector's Department thus obviating the necessity for serving notices upon the owners.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS OR REGULATIONS

Offensive Trades.—There are only two offensive trades in the Borough comprising 1 tripe boiler and 1 rag and bone dealer.

Camping Sites.—No sites were licensed during the year as camping sites.

Houses-let-in-lodgings.—There are 5 premises known to the Department to be used as Houses-let-in-lodgings.

During the year 10 visits of inspection were paid to premises of this nature.

Common Lodging-Houses.—During the year the use of No. 26 Market Street as a common lodging house was discontinued; the premises have now been demolished. There are at present two premises used as common lodging houses in St. Helens. 109 visits were paid to these premises during 1957. One of these has a very low standard of housing accommodation and there is urgent need for additional common lodging-house accommodation of a much improved standard.

Hairdressers and Barbers.—There were at the end of the year 164 persons registered as hairdressers or barbers, and the number of premises registered was 154.

235 visits of inspection were made to these premises during the year.

Byelaws with respect to Nuisances.—These byelaws prove very effective for the control of pig-keeping. There were 55 persons in the Borough known to be engaged in the keeping of pigs, at the end of the year. 49 visits of inspection were made to pig styes during the year.

OTHER SANITARY CONDITIONS

Prevention of Damage by Pests Act, 1949.—Table S.I.5 gives particulars of the work carried out under the above-mentioned Act during the year.

The equivalent of two full-time Rodent Operators are employed by the Department for this work.

St. Helens can be regarded as being in a favourable position in regard to infestation of premises by rats. This is considered as being due to the policy of the Council over a long period in requiring the rat-proofing of drains and sewers in the case of all premises where infestations have occurred.

Table S.I.5.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Report for year ended 31st December, 1957

	Type of Property							
	Local Authority	Dwelling houses	Agri- cultural	All other (including business premises)	Total			
1. Total number of properties in Local Authority's district	100	31344	140	2580	34164			
 2. Number of properties inspected as a result of: (a) notification (b) survey under the Act (c) otherwise (e.g. when visited primarily for 	27 32	139 266	100	81 417	247 815			
some other purpose) 3. Total inspections carried out	30 527	1346 2438	244	294 1771	1670 4980			
4. No. of properties inspected which were found to be infested by:	321	2130	211	1771	,1000			
(a) Rats (Major (Minor (Minor (Minor (Minor (Minor (Minor	15 	67 -28	1 —	36 -60	119 124			
5. No. of infested properties treated by Local Authority6. Total treatments carried out	40 46	28 28	1	68 77	137 152			

Shops Act, 1950.—In addition to statutory duties in regard to the ventilation and temperature of shops and the provision of sanitary conveniences, the Public Health Inspector's Department in St. Helens also takes responsibility for those provisions of the Act relating to lighting, washing facilities and facilities for the taking of meals.

No infringements of the Shops Act, 1950, were found during the year.

The number of visits paid to shop premises during 1957 was 129.

Places of Public Entertainment.— 50 visits were paid for inspection purposes. The condition of these premises was found to be generally satisfactory.

Public Houses, Beer Houses, etc.—Owing to the shortage of staff, the routine inspection of this class of premises had to be discontinued.

Canal Boats.—There is only one canal within the Borough (the St. Helenss Canal) and this has not been used for traffic for a number of years.

Mortuaries.—A Public Mortuary with post-mortem room is maintained behind the Town Hall, and is under the supervision of the Medical Officer of Health. During the year, 135 bodies were received into the mortuary and 105 post-mortem examinations were conducted.

Arrangements for the Disposal of the Dead.—At the end of the year there were 19.376 acres of land available for burials at the Borough Cemetery. There is an additional area of land adjoining the cemetery which can be utilised for extension purposes, consisting of 23.8 acres; 8.47 acres of this area will be used for the proposed Crematorium and for a Garden of Remembrance, leaving 15.33 acres for future earth burials.

Swimming Baths.—Indoor swimming baths, situate in Boundary Road, are maintained by the Corporation. There are two plunge baths and the method of purification of the water is by means of continuous filtration and chlorination. This method has continued to give reasonable satisfaction throughout the year.

Fourteen samples of water from these baths were taken by the Department for bacteriological examination during the year. The results of these examinations showed that the water was generally satisfactory for bathing purposes.

New filtration plant was put into operation during the year with a consequent improvement in the quality of the swimming bath water.

Rag Flock and Other Filling Materials Act, 1951.—Owing to the continued shortage of Public Health Inspectors, no samples of rag flock or other filling materials were taken during the year nor were any visits of inspection made.

Housing Act, 1936—Slum Clearance.—Progress was continued during the year on the two-year slum clearance programme approved by the Public Health Committee.

Confirmation was received of the Greenbank (No. 2) Compulsory Purchase Order, 1957, consisting of 175 houses and 4 other premises, and of the Merton Street Clearance Order, consisting of 4 houses. Seven further areas were represented, totalling 49 houses.

The following are particulars of houses demolished and persons rehoused during the year:—

	Demolished	Persons re- housed	Families re- housed
(1) Clearance Areas	38	334	86
(2) Individual Unfit Houses	4	23	10

In addition, one house was closed and the occupants (4 persons) were re-housed.

XIX.—HOUSING.

Housing Repairs and Rents Act, 1954

Certificates of Disrepairs under the Housing Repairs and Rents Act, 1954, up to 5th July, 1957.

(a)	Number of applications made	11
(b)	Number of applications granted	11
(c)	Number of applications made for rescission and granted	3
(d)	Number of applications made for rescission and not granted	1

Rent Act, 1957

From 6th July, 1957, applications for Certificates of Disrepair were dealt with under the Rent Act, 1957.

The following are particulars of applications received between 6th July

and 31st December, 1957:—

(1)	Number of applications for Certificates	•••••	*****	261
(2)	Number of decisions to issue Certificates			
	(a) in respect of some but not all defects	*****		167
	(b) in respect of all defects			94
(3)	Number of Undertakings given by landlords			125
(4)	Number of Certificates of Disrepair issued		*****	91

DISINFESTATION OF PREMISES AND HOUSEHOLD EFFECTS

During the year, 626 inspections of dwellinghouses and food premisess for vermin infestation were made, and the following disinfestation work wasscarried out:—

(1) Privately owned dwellinghouses	••••	176
(2) Occupied Council houses	****	108
(3) Food premises	••••	11
(4) Corporation buildings, other than dwellinghouses	****	7
(5) Other buildings	****	29
Total No. of premises treated	••••	3 31

The insecticides used were either D.D.T. or Gammexane.

During the year 4 persons were sent to the Peasley Cross Isolation Hospital for the cleansing of themselves and their clothing. In all these cases bedding was also disinfested by steam.

APPENDIX I

LOCAL AUTHORITY SERVICES FOR THE CHRONIC SICK AND INFIRM

(M/H Circular 14/57)

The above Circular issued by the Minister of Health is based on the results of a survey conducted into the residential and domiciliary facilities available to the chronic sick, particularly the aged chronic sick and infirm. As a result of this survey, the Minister makes certain recommendations to Local Health and Welfare Authorities.

In this report, although mention must be made of the recommendations which will be dealt with by the Welfare Committee, I will deal in detail only with the sections of the report affecting the Health Committee.

General Matters Affecting Welfare Committees

The Minister first defines, as regards aged and infirm persons, the responsibility of Welfare Authorities and of Hospital Authorities, and these definitions are recommended to Local Authorities as a working guide.

No question should ever arise as between Local Authorities and Hospital Authorities in the light of these definitions as to what provisions should be made for a case. The primary consideration should be the interest of the person concerned.

Regional Hospital Boards have been urged by the Minister to give high priority to the establishment of further geriatric (treatment of aged sick) departments.

Hospitals are also urged to provide convalescent units for those who, while not requiring full-scale hospital services, are not yet fit to be discharged to a hostel or to a home.

Close and constant co-operation is urged between Local Authority Welfare Services and Hospital Services so that all available accommodation in hostel or hospital is used to its best advantage. Both Authorities should keep in close touch on future plans to provide additional accommodation or services. The possibility of appointing a Hospital Geriatric Physician to hold a general appointment with the Local Authority to act as medical assessor on applications for admissions to Part III homes, and on transfers between hostels and hospitals, might be considered by the Local Authority.

The suggestion is made that short stay residence in hostels or hospitals might be arranged for aged persons as a means of giving responsible relatives a holiday break. Both Hospitals and Local Authorities are asked to extend their arrangements for this purpose as freely as their commitments allow.

General Matters Affecting Health Committees

(a) Ambulance Services

The importance of transport of old people between home and hospital is noted, and hospitals are asked to consult with Local Health Authorities when plans are being made for extended out-patient or day-hospital facilities for aged people.

(b) Admission to and discharge from hospitals

Admission of a patient to hospital is often necessary on grounds of social need as allied with chronic sickness. In such circumstances, a report may often be required by the hospital authorities, and this report should be supplied by a Health Visitor or Social Worker of the Local Authority. Such a system is a valuable means of assuring correct priority of admission. This system has only operated up to now in St. Helens in a few individual cases and has always been at the request of a general practitioner to the Medical Officer of Health. In my opinion, more use should be made of this service from the hospital side, in assessing priorities, and I would recommend that the Local Health Authority should signify its willingness to cooperate in requests of this type from local hospitals.

The Minister stresses that before discharge of a patient to the home, adequate notice should be given to the Medical Officer of Health in order that any required domiciliary services may be laid on at once. Generally speaking, this is already the practice in St. Helens, and such information is usually given from the hospitals.

(c) Domiciliary Health Services

The Minister hopes that in any areas where deficiencies are considered to exist in these services, the Local Health Authority will take steps to make these good as far as financial and other circumstances permit. The following phrase is extracted from the report::

"It must be borne in mind that these services prevent at heavier burden being thrown on more expensive residentially services".

The strengthening of domiciliary services for the elderly, particularly those who are solitary, is therefore recommended. In this respect, the invaluables work of the Home Help Service is recognised, and the value of this service can be further enhanced by assuring, with careful planning, that the type of helps given to aged people is comprehensive, and that frequent changes of home helps should be avoided.

General Points

The circular finishes by stressing the need for complete co-ordination off all the Local Authority domiciliary services.

Comment is also made on the value of voluntary services, especially inhome visiting, as a contribution to the well-being of old people, and renewed contact is urged with local voluntary bodies in the area.

Attention is drawn to the importance of Housing Authorities making adequate provision for the special requirements of old people.

Recommendations

The Minister asks Local Authorities to review their services in the lighter of the observations in the circular.

1. The Medical Officer of Health and the Chief Welfare Officer have discussed the Circular and are agreed that the co-ordination between the Local Authority Domiciliary Services at the present moment is efficient and adequate. Close contact is maintained be-

tween the personnel of Health and Welfare Departments in matters affecting the chronic sick and infirm.

- 2. It is considered that liaison should be strengthened between the Local Health Authority and hospitals in the area admitting cases of chronic sick and infirm. This would ensure correct priority of admission. The Local Health Authority should, therefore, signify to local hospital authorities its willingness to co-operate with the hospitals in supplying reports on home conditions of patients requiring urgent admission, and should urge that more use might be made of this service by the individual hospitals.
- 3. It is recommended that consideration should be given to the strengthening of the Home Help Service to ensure that no aged or infirm person is left without domiciliary assistance.
 - (a) Immediate strengthening of the service can be ensured by permitting the employment of Home Helps up to the fully authorised strength of the equivalent of 28 full-time Home Helps. (28 Home Helps working a 44-hour week gives an equivalent of 1,232 working hours per week.) At the present moment hours lost through sickness of Home Help personnel are deducted from the permitted number of hours.
 - (b) The service should be further reviewed following the above in order to ascertain any further needs.
 - (c) Consideration should be given to exploring the possibility of a night sitter's service.
 - (d) Consideration should be given to the question of a laundry service for incontinent elderly persons suffering from chronic illness.

Medical Officer of Health,

Health Department,

St. Helens.

November, 1957.

